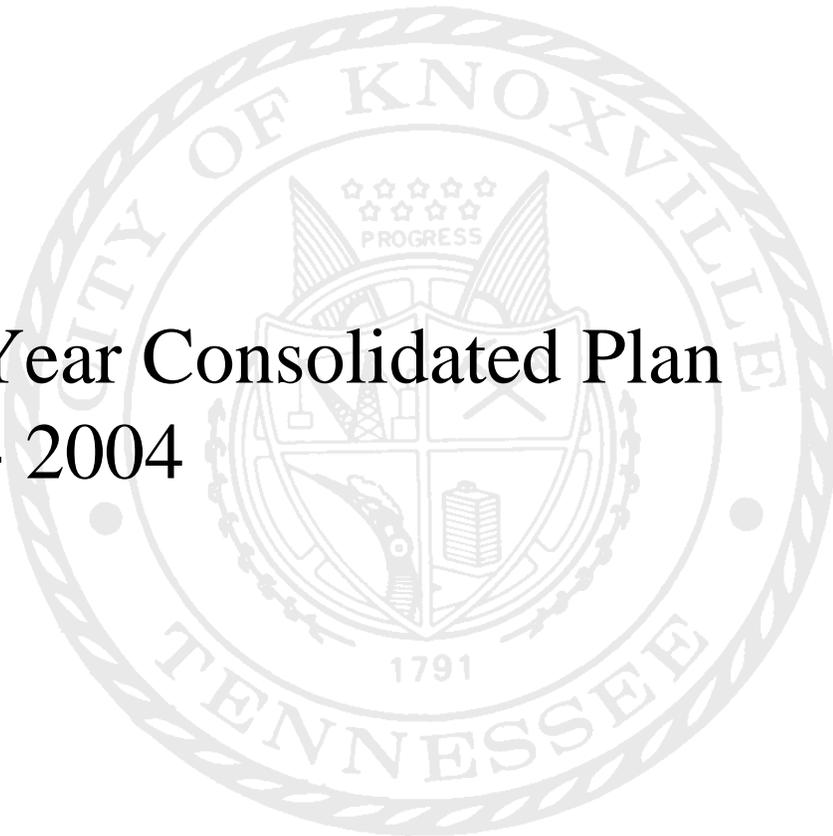


Community Development

Five-Year Consolidated Plan 2000 - 2004



Community Development Division,
Department of Development
City of Knoxville, Tennessee



EXECUTIVE SUMMARY

I. TIME PERIOD

This Consolidated Plan for Housing and Community Development covers a five-year period from July 1, 2000 through June 30, 2005.

II. GEOGRAPHIC DISTRIBUTION

In fall 1998, the City of Knoxville (in partnership with Knox County, the State of Tennessee, and the Partnership for Neighborhood Improvement) submitted an application for federal Empowerment Zone designation; the designation was awarded December, 1998. In an effort to be as inclusive as possible, Knoxville selected the largest area possible to nominate under the EZ program rules; substantial public input in 1994 led to the selection of the area to be nominated for EZ status. A 16-square mile area containing 48,192 residents in 19 census tracts of the central city plus three developable sites adjacent to the Zone has received a Round II Empowerment Zone designation. As part of its leverage commitment, the City of Knoxville has pledged the 90% of its CDBG and HOME funds for the duration of the EZ designation to affordable housing, neighborhood improvement, and economic development initiatives within the Empowerment Zone.

Within the Empowerment Zone, the EZ Strategic Plan called for a focus on comprehensive neighborhood revitalization efforts, beginning with the Bicentennial Neighborhood Initiative in Vestal and the College Homes/Passport Housing redevelopment in Mechanicsville. Accordingly, we will continue to make housing and other revitalization efforts in these two neighborhoods the top priority for investment of CDBG and HOME funds.

The remainder of Knoxville's Empowerment Zone will receive the next level of priority for housing and other activities. Downtown will also receive priority for public improvements to continue the City's implementation of the Downtown Knoxville Plan. Finally, housing programs will be made available on a citywide basis if funds remain.

III. NEEDS ASSESSMENT

Tables 1A, 2A, and 2B identify the priority needs. The Needs Assessment section of the Housing Strategy discusses these needs in more detail, describing the needs of various household types in the areas of housing condition, cost burden, availability of units, overcrowding, accessibility, neighborhood issues, and disproportionate needs. The section also describes the needs of public housing and of special needs populations, as well as lead-based paint needs and barriers to affordable housing.

IV. PRIORITY NEEDS

Priority Homeless Needs – Table 1A identifies the gaps and priorities in homeless services.

Priority Housing Needs – Table 2A identifies a level of priority for each category of income and family type. If a category is rated as a “High” priority, activities to address this need will be funded by the City of Knoxville with federal funds either alone or in conjunction with the investment of other public or private funds during the 5 years of this Consolidated Plan. If funds are available, the City may fund activities of a “Medium” priority with federal funds either alone or in conjunction with the investment of other public or private funds during the 5 years of this Consolidated Plan. Also, the City will take actions to help locate other funds to address these needs. The City will not fund activities of a “Low” priority with federal funds. However, the City will consider certifications of consistency for other entities' applications for federal assistance.

Based on the above review of housing needs, the following priorities were identified:

High Priorities

Extremely Low and Very Low Income Renter Households - all household types

67.4% of these households have a housing problem compared with 40% of renter households in the city as a whole. Housing problems exist in the areas of condition, affordability, availability, as well as overcrowding for large families and accessibility for

Table 1A

Continuum of Care: Gaps Analysis

| | | Estimated Need | Current Inventory | Unmet Need/Gap | Relative Priority |
|--|------------------------------|----------------|-------------------|----------------|-------------------|
| Individuals | | | | | |
| Beds/Units | Emergency Shelter | 409 | 455 | -46 | L |
| | Transitional Housing | 347 | 393 | -46 | M |
| | Permanent Supportive Housing | 103 | 65 | 38 | H |
| | Total | 859 | 913 | -54 | |
| Supportive Service Slots | Job Training | 266 | 200 | 66 | M |
| | Case Management | 859 | 925 | -66 | H |
| | Substance Abuse Treatment | 215 | 148 | 67 | H |
| | Mental Health Care | 481 | 286 | 195 | H |
| | Housing Placement | 263 | 263 | 0 | L |
| | Life Skills Training | 859 | 158 | 701 | H |
| | Crisis Management | 123 | 113 | 10 | L |
| | Transportation | 685 | 144 | 541 | H |
| Education | 411 | 40 | 371 | H | |
| Subpopulations | Chronic Substance Abuse | 430 | 240 | 190 | H |
| | Seriously Mentally Ill | 481 | 51 | 430 | H |
| | Dually-Diagnosed | 144 | 35 | 109 | H |
| | Veterans | 172 | 40 | 132 | L |
| | Persons with HIV/AIDS | 20 | 11 | 9 | M |
| | Victims of Domestic Violence | 69 | 49 | 20 | M |
| | Youth | 33 | 24 | 9 | M |
| | Criminal Record | 77 | 12 | 65 | H |
| Elderly | 16 | 10 | 6 | M | |
| Persons in Families With Children | | | | | |
| Beds/Units | Emergency Shelter | 205 | 183 | 22 | L |
| | Transitional Housing | 122 | 138 | -16 | M |
| | Permanent Supportive Housing | 180 | 56 | 124 | H |
| | Total | 507 | 377 | 130 | |
| Supportive Service Slots | Job Training | 157 | 108 | 49 | M |
| | Case Management | 507 | 262 | 245 | H |
| | Child Care | 304 | 169 | 135 | H |
| | Substance Abuse Treatment | 127 | 85 | 42 | H |
| | Mental Health Care | 284 | 164 | 120 | H |
| | Housing Placement | 120 | 120 | 0 | L |
| | Life Skills Training | 507 | 112 | 395 | H |
| | Crisis Management | 72 | 7 | 65 | H |
| | Transportation | 406 | 17 | 389 | H |
| | Education | 100 | 10 | 90 | H |
| Subpopulations | Chronic Substance Abuse | 254 | 60 | 194 | H |
| | Seriously Mentally Ill | 284 | 48 | 236 | H |
| | Dually-Diagnosed | 85 | 0 | 85 | H |
| | Veterans | 5 | 0 | 5 | L |
| | Persons with HIV/AIDS | 8 | 8 | 0 | L |
| | Victims of Domestic Violence | 46 | 41 | 5 | L |

persons with disabilities.

Extremely low, very low and other low income homeowners

53% of these households have a housing problem (63.7% of very low) compared with 30% of homeowners in the city as a whole. Housing problems exist in the area of condition, affordability of utilities and repairs, as well as overcrowding for large families and accessibility for persons with disabilities.

Medium priorities

Low Income Renter Households - all household types
39% of these households have a housing problem compared with 40% of renter households in the city as a whole. These households are better able than very low income renters to afford private market units but at the lower end of the income grouping, still need assistance. This is a prime category for first time home buyer programs.

Special populations

The number of households in this category in need of housing assistance is not available but a need obviously exists. Because HUD funds housing for special needs populations through competitive programs, the City does not plan on targeting funding to this group. However, it is expected that this population will be assisted through programs to assist low-income renters.

Priority non-housing community development needs – Table 2B contains a summary of priority non-housing community development needs. The priority levels have been established based upon review of public input, information received in consultations with other agencies, and funding availability. Needs identified as High Priority should expect to have funding allocated to them during the time period covered by this Consolidated Plan. Needs identified as Medium Priority may have funding allocated to them if there is sufficient funding available; the City will generally provide certifications of consistency for applications for grant funds to address these needs. Needs identified as Low Priority are not expected to receive funding through this Consolidated Plan; the City will consider

providing certifications of consistency for applications for grant funds to address these needs. According to the HUD Consolidated Plan guidelines, the estimated number of units and estimated dollars to address these needs are not required information; since adequate data is not readily available to accurately respond to these questions, the City has left these fields in the table blank.

V. SPECIFIC OBJECTIVES

The specific objectives for homeless assistance are outlined in Table 1C and the specific objectives for housing and non-housing activities are outlined in the Table 2C on the following pages.

VI. HOW ACTIVITIES WILL ADDRESS IDENTIFIED NEEDS AND OBJECTIVES

Housing activities - The characteristics of the housing market indicate that there are needs for a variety of activities to address the housing needs of low- to moderate-income residents. The very high percentage of substandard housing, particularly in the Central, East and South sectors shows the need for rehabilitation programs for both homeowners and rental property. Rehabilitation programs will improve housing conditions, help to keep utility and maintenance costs down, help to stabilize neighborhoods, help to make units accessible, and help improve the condition of lower rent rental property without requiring an excessive rent increase. Additional rental assistance is also sorely needed to help tenants afford private market rental units. Additional affordable rental units that qualify for rental assistance are also needed, as well as units affordable to single individuals without rental assistance. These needs may be met through new construction and/or substantial rehabilitation. Acquisition of existing units is another option when this will result in keeping units in the affordable inventory. New construction and substantial rehabilitation is needed to meet the need for affordable homes for first-time homebuyers, as well as affordable financing and support services such as credit counseling and homeownership training.

As there are numerous needs and limited resources, the City will target the federal resources it receives at activities not being addressed thorough the private

market, PHA activities, or HUD competitive programs. As Knoxville is also an Empowerment Zone, the City will also target its federal housing funding at activities that address the goals of the Empowerment Zone plan (i.e., the neighborhood revitalization strategy) while meeting housing objectives. These activities include rehabilitation, new construction to replace demolished housing and infill new construction where it contributes to neighborhood revitalization.

Non-housing community development long-term objectives – All of the community development objectives identified below are consistent with the statutory goals of the HUD funding programs. All of the objectives fall into one or more of the statutory goal categories: decent housing; suitable living environment; or expanded economic opportunities. All of the activities primarily either assists low- to moderate-income persons or areas or eliminates slum and blighting conditions. As noted above, the

Table 2A

| PRIORITY HOUSING NEEDS (households) | | Priority Need Level High, Medium, Low | | Unmet Need | Goals |
|--|---------------|---|---|-------------------|--------------|
| Renter | Small Related | 0-30% | H | 2231 | 42 |
| | | 31-50% | H | 1270 | 120 |
| | | 51-80% | M | 798 | 100 |
| | Large Related | 0-30% | H | 378 | 10 |
| | | 31-50% | H | 278 | 25 |
| | | 51-80% | M | 209 | 24 |
| | Elderly | 0-30% | H | 697 | 15 |
| | | 31-50% | H | 659 | 60 |
| | | 51-80% | M | 361 | 42 |
| | All Other | 0-30% | H | 3122 | 50 |
| | | 31-50% | H | 1691 | 152 |
| | | 51-80% | M | 1257 | 139 |
| | Owner | 0-30% | H | 2129 | 390 |
| | | 31-50% | H | 1755 | 430 |
| | | 51-80% | H | 1430 | 130 |
| Special Populations | 0-80% | M | * | 8 | |
| Total Goals | | | | | 1,737 |
| Total 215 Goals | | | | | 1,037 |

* Special populations are in large part included in the “All Other” Renters category.

TABLE 2B - COMMUNITY DEVELOPMENT NEEDS

| PRIORITY COMMUNITY DEVELOPMENT NEEDS | Priority Need Level High, Medium, Low, No Such Need | Estimated Priority Units | Estimated Dollars to Address |
|--|--|-------------------------------------|---|
| PUBLIC FACILITY NEEDS | | | |
| Neighborhood Facilities | M | | |
| Parks and/or Recreation Facilities | M | | |
| Health Facilities | M | | |
| Parking Facilities | L | | |
| Solid Waste Disposal Improvements | L | | |
| Asbestos Removal | L | | |
| Non-Residential Historic Preservation | M | | |
| Other Public Facility Needs | L | | |
| INFRASTRUCTURE | | | |
| Water/Sewer Improvements | M | | |
| Street Improvements | M | | |
| Sidewalks | M | | |
| Sewer Improvements | M | | |
| Flood Drain Improvements | M | | |
| Other Infrastructure Needs | M | | |
| PUBLIC SERVICE NEEDS | | | |
| Handicapped Services | M | | |
| Transportation Services | M | | |
| Substance Abuse Services | M | | |
| Employment Training | M | | |
| Health Services | M | | |
| Other Public Service Needs | M | | |
| ANTI-CRIME PROGRAMS | | | |
| Crime Awareness | M | | |
| Other Anti-Crime Programs | M | | |
| YOUTH PROGRAMS | | | |
| Youth Centers | M | | |
| Child Care Centers | M | | |
| Youth Services | M | | |
| Child Care Services | M | | |
| Other Youth Programs | M | | |
| SENIOR PROGRAMS | | | |
| Senior Centers | M | | |
| Senior Services | M | | |
| Other Senior Programs | M | | |
| ECONOMIC DEVELOPMENT | | | |
| Rehab; Publicly- or Privately - Owned Commercial/Industrial | M | | |
| CI Infrastructure Development | M | | |
| Other Commercial/Industrial Improvements | M | | |
| Micro-Enterprise Assistance | M | | |
| ED Technical Assistance | M | | |
| Other Economic Development | M | | |
| PLANNING | | | |
| Planning | H | | |
| TOTAL ESTIMATED DOLLARS NEEDED: | | | |

majority of funding for these objectives will come from the Round II Empowerment Zone program, if that program receives full funding from Congress.

The long-term community development objectives for this plan are:

- Grow business capital
- Create a climate that encourages business start-up and expansion
- Create sustainable mixed tenure and income communities
- Increase housing choice and restart the housing ladder
- Improve job readiness
- Eliminate institutional barriers to economic opportunity and self-sufficiency
- Strengthen family ties
- Promote civic attachment and community building
- Promote pride of place

The non-housing community development projects identified in the specific objectives advance the City's progress toward one or more of the long-term community development objectives.

Table 1C
Summary of Specific Homeless/Special Populations Objectives
(Table 1A/B Continuation Sheet)

Applicant's Name Knoxville, TN

Priority Need Category
Homeless

Specific Objective
Number S-1

Over the next five years, the City will use its Emergency Shelter Grant funds to assist in the operations, maintenance, and rehabilitation of shelters for the homeless. We anticipate assisting two or more shelters per year in this way.

Specific Objective
Number S-2

Over the next five years, the City will use its Emergency Shelter Grant funds to assist in providing essential services for homeless persons. We anticipate assisting two or more service providers per year in this way.

Specific Objective
Number S-3

The City will continue to coordinate the Continuum of Care application process to help implement the goals and objectives identified in the Continuum of Care.

Specific Objective
Number

Specific Objective
Number

Specific Objective
Number

Specific Objective
Number

**Table 2C – Housing
Summary of Specific Housing and Community Development Objectives
(Table 2A/B Continuation Sheet)**

Applicant's Name: City of Knoxville, TN

Priority Need Category

Housing

Specific Objective

Number H-1

Use CDBG and HOME funds, in conjunction with State and private resources, to provide financing to rehabilitate or replace 250 owner-occupied homes in substandard condition. Five year goal = 40 extremely low, 80 very low and 130 low income households by June 30, 2005. Annual goal = 8 extremely low, 16 very low and 26 low income households.

Specific Objective

Number H-2

Use CDBG and HOME funds, in conjunction with private resources, to provide financing to rehabilitate 250 affordable rental units. Five year goal = 100 extremely low, 100 very low and 15 low income renter households by June 30, 2005. Annual goal = 20 extremely low, 20 very low and 10 low income households.

Specific Objective

Number H-3

Use CDBG funds, in conjunction with State funds, HOPE 3 funds and sale proceeds, and private resources to provide homeownership opportunities, including financing and training, for low- to moderate-income homebuyers. Also provide homeownership opportunities for non-low income households when part of the Neighborhood Revitalization Strategy, such as Bringing Home the Badge Program. Five year goal = 10 extremely low, 195 very low and 195 low income renter households by June 30, 2005. Annual goal 2 extremely low, 39 very low and 39 low income households

Specific Objective

Number H-4

Use HOME CHDO set-aside funds to assist Community Housing Development Organizations in their activities to develop housing for sale or rent to low- to moderate-income purchasers; and to develop housing to be used as supportive transitional or permanent housing for special needs populations. Five year goal = 8 extremely low (special populations), 12 very low and 20 low income renter households by June 30, 2005. Annual goal = 2 extremely low, 2 very low and 4 low income households.

Specific Objective

Number H-5

Use CDBG funds to acquire blighted houses and lots to be sold for the purpose of clearing blight and developing housing opportunities, primarily homeownership and especially for low- to moderate-income households. Five year goal = 5 extremely low, 50 very low and 75 low income and 20 moderate income households by June 30, 2005. Annual goal = 1 extremely low, 10 very low, 15 low and 4 moderate income households.

Specific Objective

Number H-6

Use CDBG funds to provide assistance for emergency and small repairs.

Five year goal = 350 extremely low, 350 very low income households by June 30, 2005. Annual goal = 70 extremely low, 70 very low.

Table 2C -Nonhousing
Summary of Specific Housing and Community Development Objectives
 (Table 2A/B Continuation Sheet)

Applicant's Name City of Knoxville, Tennessee

Priority Need Category

Planning/Administration

Specific Objective

Number P/A-1

Use CDBG, HOME, and ESG funds to operate Community Development program to deliver services, including Housing Rehabilitation Programs, Homeless Assistance activities, Blighted Property Acquisition Program, various revitalization initiatives, and subrecipient projects through June, 2005. Specific goals include development of Consolidated Plan, Annual Action Plan, annual Performance Report (CAPER), and EZ Annual Report.

Priority Need Category

Public Services

Specific Objective

Number PS-1

Use CDBG funds to provide technical assistance and/or design assistance to at least 10 neighborhood groups and community organizations per year, through June 2005.

Specific Objective

Number PS-2

Use ESG and CDBG funds to provide services for homeless assistance and fair housing assistance to at least 225 persons per year through June 2005.

Priority Need Category

Public Facilities

Specific Objective

Number PF-1

Use CDBG funding to assist with renovation of two community facilities by June, 2001.

Priority Need Category

Infrastructure/Public Improvements

Specific Objective

Number I-1

Use CDBG funding to assist with infrastructure improvements in Downtown Knoxville and/or Empowerment Zone neighborhoods when possible; implement at least three projects by June 2005.

DEVELOPING AND IMPLEMENTING THE CONSOLIDATED PLAN

I. THE PROCESS FOR DEVELOPING THE PLAN

Description of the development of the plan – Consolidated Planning has been an ongoing process in Knoxville since 1994. Our efforts began with the preparation of the 1994 Round I Empowerment Zone (EZ) application. That planning process involved hundreds of citizens and agency staff in an effort to prepare a community-based comprehensive revitalization plan for the most distressed areas of Knoxville's central city.

Although that Round I EZ application was not successful, it did form the basis for the first Consolidated Plan, submitted in spring 1995, and it has helped to guide community development efforts in the City ever since.

In 1998, Knoxville built upon the foundations laid in those earlier plans when it developed its successful Round II Empowerment Zone Strategic Plan. The planning for the Round II EZ once again involved hundreds of citizens and agency staff in public meetings and planning committees. These volunteers identified the most pressing needs facing the community and helped to develop workable economic development and community revitalization strategies to meet these needs.

Because Knoxville's Empowerment Zone covers such a large area (16 square miles, which is more than 20% of the geographic area, and 48,192 people, which is almost 30% of the population of Knoxville) and includes 19 of the City's 25 low- to moderate-income census tracts, the Consolidated Plan is inextricably linked with the Empowerment Zone. The goals and strategies identified in the Empowerment Zone Strategic Plan form the basis for much of this Consolidated Plan.

To prepare for this new Consolidated Plan, Knoxville has also undertaken public input and consultations with agencies serving Knoxville's low- to moderate-income residents. The public input, described in more detail below, included surveys of residents as well as public hearings. The consultations, also described in more detail below, included: round-table discussions on topics such as the needs of youth and seniors; surveys of housing and service agencies; and meetings with a variety of agencies. In addition, staff at the City and the Metropolitan Planning Commission have gathered information about resources and services available in the community and about unmet community needs.

Description of lead agency responsible for overseeing development of the consolidated plan – The City of Knoxville Department of Development, Community Development Division is the lead agency responsible for overseeing development of the Consolidated Plan.

The Department of Development fosters Knoxville's economic growth, improves inner-city neighborhoods, provides housing opportunities, and promotes quality development. The Department is made up of three divisions:

- Development Projects
- Development Services (which includes Codes Enforcement, Building Inspections, and Fire Inspections)
- Community Development.

The Community Development division takes a comprehensive approach to revitalizing Knoxville's low- to moderate-income neighborhoods. In order for resources to have the greatest impact, the division targets its programs to periodically selected strategy areas. The division's work falls into five main categories:

- Programs to improve housing opportunities for lower-income homeowners, tenants, and first-time homebuyers as well as assistance to organizations serving Knoxville's homeless population.

- A Fair Housing Assistance Program to promote equal opportunity in housing and to investigate complaints of housing discrimination in Knoxville.
- Activities that identify vacant, blighted, or problem properties and seek developers to return them to productive use.
- Support for programs that assist neighborhoods in identifying and solving their own problems.
- Support for programs that provide training and employment to lower-income citizens or that assist lower-income citizens in starting small businesses.

The Community Development Office also oversees the implementation of Knoxville's Empowerment Zone for the City of Knoxville. The City serves as grantee and fiscal agent for the EZ and provides reports and information to the U.S. Dept. of Housing and Urban Development as needed on the initiative.

The consultation process – The first phase of the consultation process was a cooperative effort with Knox County. Representatives from the City and County met in Fall, 1999 to discuss the Consolidated Planning process and to identify areas where the two units of government could work together to more efficiently gather input for their respective Plans. Knox County proposed a series of round-table discussions with various agencies serving special needs populations in the areas of youth, elderly, persons with disabilities, persons with HIV/AIDS, and persons with mental illness and alcohol and drug addiction.

The five round-table discussions were co-sponsored by Knox County and the City of Knoxville and facilitated by the Center for Neighborhood Development. The schedule for the meetings was as follows:

- Children/youth
Wednesday, November 3, 1999
- Senior Citizens
Thursday, November 4, 1999

- Persons with Mental Illness or A/D Dependency
Monday, November 8, 1999
- Persons with Disabilities
Tuesday, November 9, 1999
- Persons with HIV/AIDS
Wednesday, November 10, 1999

The participants in these sessions represented City and County government, physical health and mental health service providers, housing agencies, the public housing authority, homeless assistance providers, educational institutions, and other social service agencies. Lists of the agencies who participated in these sessions are included in Appendix A.

At each session, the facilitators elicited the following information:

- Information about the agencies represented at the meeting, including the specific population served and any demographic concentrations (gender, race, ethnic, etc.);
- A brainstormed listing, divided into the categories of housing and other services, of assets already in place to serve this population;
- A list, also divided into the categories of housing and other services, of needs not currently being met for this population; and
- An estimate of the numbers of individuals turned away or put on waiting lists because of lack of resources.

The participants then ranked the priority of the various needs, again keeping housing and other services separate. A summary of the results of these sessions is presented later in this document.

The second phase of the consultation process involved a needs assessment survey of agencies serving the low- to moderate-income citizens and special needs populations in Knoxville. Survey forms were sent to more than 150 agencies that provide housing, health services, homeless assistance, education, and social services, as well as to Knox County (the adjacent unit of local

government) and to various State of Tennessee agencies. We received 52 responses from agencies. A listing of the agencies who were sent surveys and those who responded is included in Appendix A.

The survey form included questions on housing, homeless assistance, and other services. In the area of housing, questions included:

- Identification of barriers to affordable housing development
- Inventory of housing-related services provided
- Identification of special sub-populations served
- Information on unmet housing needs (waiting lists, etc.)
- Information on difficulties in obtaining housing for clients
- Ranking of priority housing needs

In the area of homeless assistance, questions included:

- Inventory of services provided
- Information on special needs sub-populations
- Information on demand for services and unmet needs

In the area of other services, questions included:

- Inventory of services provided
- Information on unmet needs
- Ranking of non-housing community development needs

A copy of the survey form is included in Appendix A. A summary of the results are reported later in this document.

The third phase of consultation involved meetings with representatives from specific agencies. For example, City staff met with staff from the Metropolitan Planning Commission to discuss issues related to the Consolidated Planning process and to share data relevant to the needs assessment and market analysis. City staff also consulted with staff from the Knox County Health Department to discuss issues related to lead-based paint as a health and housing concern in Knoxville. Data from that meeting is included in the needs assessment section of this document. The local public housing authority

submitted its draft plan for City review and comment.

Finally, a copy of the draft plan was submitted to Knox County (the adjacent unit of local government, the Metropolitan Planning Commission, and the State of Tennessee Local Planning Office to solicit their comments.

Results of the consultation process - The consultation process yielded a large volume of data that is incorporated into the Housing Market Analysis and the Needs Assessment portions of this plan. It also generated a number of issues currently confronting our community. The most frequently cited needs from the consultation round-table discussions are listed below:

Housing-related needs

- Affordable assisted living for seniors
- Affordable housing for persons with criminal records, especially those with mental illness or alcohol or drug dependency
- Housing for “non-compliant” consumers with mental illness or alcohol/drug dependency who have “burned bridges” behind them
- Affordable housing for low-income families, especially for homeownership
- Supervised living for persons with HIV/AIDS
- More handicapped accessible Section 8 housing
- Transitional housing for homeless persons
- Credit counseling to overcome poor credit

Other service needs

- In-home personal care and home-making services for low income seniors
- Mental health services in jail
- Transportation for seniors, especially to places other than medical appointments
- Transportation for people who do not own a car
- Mentoring/tutoring programs for children
- Affordable child care and after-school care
- More early childhood education intervention
- More supportive services for persons with disabilities
- Health care (mental and physical) for non-service connected low-income veterans and family members

- More recreational facilities in inner-city
- Long-term mental health and alcohol/drug treatment for persons with HIV/AIDS

II. CITIZEN PARTICIPATION

Names of organizations involved in the plan – The City of Knoxville took the lead role in preparing this Consolidated Plan. Portions of the consultation process were conducted in cooperation with Knox County. The Center for Neighborhood Development facilitated the consultation round-table discussions. The Metropolitan Planning Commission provided some of the data and maps contained in this draft. Knoxville's Community Development Corporation (KCDC) and Economic Ventures provided data used in this plan and assisted in developing a mailing list for a consumer survey. A lengthy list of agencies assisted in the planning process either by participating in a round-table discussion, completing an agency survey, or sending a representative to a public hearing. Appendix A contains listings of all of these participants.

Summary of citizen participation process – The citizen participation process is one small piece of ongoing citizen participation and involvement. In the sections of this document describing institutional structure and coordination, it will be clear that City staff are interacting with and getting input, ideas, and comments from citizens on a continuing basis. For the specific purpose of preparing this Consolidated Plan, the City of Knoxville undertook the following citizen participation activities:

- A survey of the members of the Council of Involved Neighborhoods;
- A survey of consumers;
- A public hearing to gather citizen input on community needs;
- A request for community proposals for CDBG and ESG subrecipient funding; and
- A public hearing/public comment period to gather citizen feedback on the draft Consolidated Plan.

Survey of the Council of Involved Neighborhoods – At the regular monthly meeting of the Council of Involved Neighborhoods (COIN) that was held on November 1, 1999, the agenda included an opportunity for City staff to present a brief explanation of the Consolidated Planning process and to distribute a survey on housing and community development needs to the membership present at the meeting. A copy of the survey document is included in Appendix A.

Based on the responses to the survey, the COIN membership identified the following issues as being of high priority:

- Renovating housing for homeowners
- Improving rental housing
- Helping people become homeowners
- Minor home repair for seniors
- Cleaning/redeveloping dirty lots
- Assistance for the startup of small/micro businesses
- Sidewalk repairs and improvements
- New/expanded parks

Survey of Consumers – City staff designed a survey instrument to help determine the housing and community development needs faced by possible consumers of HUD-funded services. The mailing list for the surveys was drawn from: the City's waiting list for owner-occupied rehabilitation; KCDC's waiting list for Section 8 housing; and the mailing list of Economic Ventures, a nonprofit that assists low- to moderate-income individuals to become entrepreneurs. A total of 936 surveys were sent to citizens; 182 surveys were completed and returned, which is a response rate of 19%. A copy of the survey is included in Appendix A.

Among the most commonly identified needs/problems were:

- Housing in need of rehabilitation
- High utilities costs
- Lack of money for down-payment
- Credit problems
- Lack of high-quality affordable housing options
- Crime/safety concerns
- Need for sidewalk repairs/improvements

Public hearing to gather community input on needs

– Public hearings to gather input and comments regarding community needs, priorities, and use of funds were held on Tuesday, December 7, 1999 at two times and locations. A hearing was held at the L.T. Ross Building (2247 Western Avenue) at 11:00 a.m. and at City Hall at the Mall (at Knoxville Center, 3000 N. Mall Road) at 6:00 p.m. The meetings were held in facilities accessible to persons with disabilities. An advertisement announcing the date and locations of the public hearings appeared in the Knoxville-News Sentinel on Sunday, November 22, 1999; a copy of the advertisement is included in Appendix A. A letter announcing the public hearings was sent to approximately 600 community leaders and agency representatives on November 19, 1999. The City of Knoxville also issued a press release announcing the public hearings and notice of the hearings was included in Mayor's Report at City Council prior to the hearings.

At the hearing, City staff presented information about the purpose of the Consolidated Plan, the planning process, the relationship of this process to the Empowerment Zone, and the amount of federal funds expected to be available for the upcoming year. Staff then provided a description of the public input (such as surveys and round-table discussions) that had occurred prior to the public hearing and reviewed the needs identified through that input. The attendees were then asked to offer comment on these identified needs and to help identify other community needs. Then attendees were asked to help identify barriers that prevent or hinder the development of affordable housing. Finally, City staff provided attendees with a schedule of upcoming events and deadlines related to Consolidated Planning.

Citizen Input Comments – The public hearing generated a number of comments and suggestions, including:

- Need for broader accessible housing opportunities for persons with disabilities;
- Suggestion that economic and business development be made a priority;
- Inquiry regarding process for allocating funds

and staff resources to inner-city communities;

- Suggestion that increased youth outreach activities would help promote civic pride and livability;
- Need for training programs and workshops on housing programs and other opportunities for homeownership;
- Observation of the desire of community groups to become more involved in the planning and implementation of projects that affect them.

Request for community proposals for CDBG and ESG subrecipient grants

– In January 2000, the City conducted a request for proposals from organizations seeking CDBG and ESG funds for the year beginning July 1, 2000. The applications developed by the City described the priorities for the upcoming year based on the Consolidated Planning process and the Continuum of Care for the Homeless and outlined the criteria upon which the proposals would be evaluated.

On January 20, 2000, City staff conducted a technical assistance workshop from 3:00 p.m. to 5:00 p.m. at the L.T. Ross Center (2247 Western Avenue) for anyone needing assistance with the applications. A list of the attendees at this meeting is included in Appendix A.

The City received 13 proposals requesting a total of \$1.11 million of CDBG funds and 8 proposals requesting more than \$156,000 in ESG funds. Based on the criteria outlined in the applications, staff has evaluated the proposals and made recommendations as described in the project listing section of the Annual Action Plan. Funding of the CDBG proposals has been approved as part of the City's annual budget process in April 2000.

Public hearing to get citizen comment on the draft Consolidated Plan

– A hearing to gather citizen comments of the draft of this plan was held on Tuesday, April 25, 2000 at 11:00 a.m. at the L.T. Ross Building. Notice of this public hearing appeared in the Knoxville News-Sentinel on April 9, 2000; a copy is included in Appendix A. A list of those in attendance is also included in Appendix A.

Citizen comments on the draft plan – The following summarizes the comments received on the draft plan and any responses:

Comment: It was noted that AIDS Response Knoxville needs to be deleted from page 26 of the Strategic Plan, because they are no longer operating.

Response: The organization was deleted from the listing.

Comment: It was noted that the continuum of care was progressing and that the Coalition for the Homeless had formally approved the chart listing priorities at the meeting held on April 25, 2000.

Response: That chart and other changes recommended by the Coalition's Continuum of Care Committee will be included in the final version of this document.

Comment: Some of the program names in the section describing the Community Action Committee have changed or will be changing at the end of the fiscal year.

Response: The text has been updated to reflect the changes identified.

Comment: Several typographical errors were noted.

Response: The indicated errors have been corrected.

Comment: Home Federal Bank staff noted items that needed to be changed or updated in the description of the bank's programs.

Response: The description has been revised to incorporate the noted changes.

Public comment periods – The public comment period on the draft of this Consolidated Plan was April 14, 2000 through May 15, 2000. Notice of availability of the draft for citizen review was published in the Knoxville News-Sentinel on Sunday, April 9, 2000; this notice included a summary of the funding expected to be available and a summary of the proposed uses of funds, as well as

information on locations for public review of the document, information about the public hearing, and contact information for obtaining a copy of the draft plan or for submitting comments. A copy of the advertisement is included in Appendix A.

Approval of the Consolidated Plan – The Knoxville City Council approved submission of this Consolidated Plan at its May 2, 2000 meeting. A copy of the resolution is included in Appendix A.

III. INSTITUTIONAL STRUCTURE FOR IMPLEMENTING THE PLAN

Institutional structure through which the jurisdiction will carry out its housing and community development plan – This Consolidated Plan will be carried out through the collaborative efforts of numerous organizations. The City of Knoxville will take the lead in implementing the housing and community development plan. It will be assisted in these efforts by several other public agencies, a variety of nonprofit subrecipients, and several CHDOs. Leveraged funding for the housing and community development plan will come from local financial institutions, particularly the lender partners participating in the FirstHome Program. Implementation of the Empowerment Zone Strategic Plan will be overseen and coordinated by the Partnership for Neighborhood Improvement. Assistance for homeless persons will be coordinated by the Knoxville Coalition for the Homeless. Revitalization efforts in the Vestal Community will be coordinated by the Bicentennial Neighborhood Initiative Task Force. The Community Housing Resource Board organizes projects to promote equal housing opportunity.

The section following provides brief descriptions of the public agencies, nonprofit subrecipients and CHDOs, and private financial institutions that will be assisting the City in carrying out the CDBG, ESG, and HOME funded elements of the housing and community development plan. The section also provides a brief description of the Partnership for Neighborhood Improvement and the agencies

currently represented on its board of directors, as well as a listing of the agencies identified in the Empowerment Zone Strategic Plan as lead implementing entities or partners in Year 1 and 2 projects. The section then contains a brief description of the Knoxville Coalition for the Homeless and a listing of agencies currently participating at some level in the Coalition. Finally, the section contains a brief description of the Bicentennial Neighborhood Initiative Task Force and a listing of participants serving on the Task Force.

Public Agencies

CITY OF KNOXVILLE DEPARTMENT OF DEVELOPMENT, DIVISION OF COMMUNITY DEVELOPMENT (DCD) - This is the City's lead entity for the development of priorities and strategies for this Consolidated Plan. DCD will monitor and report on Consolidated Plan performance for the City, and determine if applications for funding are consistent with the Consolidated Plan.

DCD is the department responsible for administering federal housing and homeless funds which the City receives as an entitlement city. These funds include the Community Development Block Grant Program, the HOME Investment Partnership Program, and the Emergency Shelter Block Grant. DCD also applies for and receives other federal and state funds which it primarily uses to provide housing rehabilitation financing. These include the State HOUSE Entitlement and Demonstration Programs, the State Bicentennial Neighborhood Initiative for the Vestal Neighborhood, and the HOPE 3 grants which the City administers and implements with Knox Housing Partnership.

DCD is also the City agency assigned to undertake day-to-day management of the City's responsibilities related to the Knoxville/Knox County Empowerment Zone. The agency, with assistance from other City departments, oversees compliance with the EZ grant agreement and acts as fiscal agent for the EZ. The agency also plays a lead role in reporting to HUD on progress in the EZ.

DCD activities which will help carry out this housing

and community development strategy include rehabilitation financing for low and moderate homeowners, rehabilitation financing for low- to moderate-income rental property, in-fill housing and homeownership/rehabilitation programs such as "Homemakers," and anti-displacement/relocation assistance. DCD also carries out the City's Fair Housing Assistance Program and provides financing and technical assistance to nonprofits who will carry out parts of this housing strategy.

The City's Department of Development has representatives on the Partnership for Neighborhood Improvement, the Knox Housing Partnership, the Knoxville Coalition for the Homeless, the Bicentennial Neighborhood Initiative Task Force, and the Community Housing Resource Board. The Department is also identified as the lead implementing entity for several Empowerment Zone projects, including: Redevelopment of Brownfields, HOPE VI Neighborhood Commercial Development, Mixed Income Housing Financing, Improving Rental Housing, Comprehensive Revitalization Efforts; the City is also identified as a partner in several other EZ projects. Implementation of these EZ projects will depend upon funding appropriated by Congress.

KNOXVILLE'S COMMUNITY DEVELOPMENT CORPORATION (KCDC) – KCDC is a multipurpose agency administering housing, redevelopment, and social services programs. As the Public Housing Agency (PHA) for the City, KCDC owns, manages and maintains the public housing stock. Additionally, KCDC serves as HUD's administrative agent for the Section 8 Program that includes rental assistance certificates and vouchers and the moderate rehabilitation program. The Section 8 certificates and vouchers provide rental assistance for families living in privately-owned dwellings. KCDC also owns and operates a Section 8 Substantial Rehabilitation Project and an assisted living program called "The Manor." Though most of the public housing consists of multi-family developments, KCDC also operates a 26-unit scattered-site development in Mechanicsville as well as 5 developments specifically designed for the elderly and disabled.

KCDC is currently developing a HOPE VI project in the Mechanicsville neighborhood on the site of the former College Homes development and in the surrounding community.

KCDC administers a self-sufficiency program which is designed to encourage, assist, train or facilitate economic independence, specifically assisting residents in getting off public assistance rolls and moving out of public housing. Through its subsidiary, Economic Ventures, KCDC operates a peer-lending model microloan program that helps lower-income citizens, including public housing residents, become entrepreneurs.

KCDC has the authority to issue bonds to finance low-income housing projects. As the City's redevelopment authority, KCDC is currently carrying out a redevelopment plan in the Mechanicsville neighborhood related to the HOPE VI project. This plan involves the acquisition and disposition of land which is being used for the development of low-to-moderate-income housing opportunities. KCDC will also work with the City to acquire land through the City's blighted property ordinance and other acquisition as needed.

KCDC participates with the Knox Housing Partnership, the Knoxville Coalition for the Homeless, and the Bicentennial Neighborhood Initiative Task Force. KCDC was the major source of support for the Affordable Housing Demonstration Fund using sales proceeds from its Turnkey III homeownership program and is represented on the board of the permanent Affordable Housing Trust Fund. KCDC is currently represented on the Partnership for Neighborhood Improvement. KCDC is identified in the EZ Strategic Plan as a partner in implementing several Empowerment Zone projects. Implementation of these projects depends upon the appropriation by Congress of funding to implement the EZ plan.

KNOXVILLE/KNOX COUNTY METROPOLITAN PLANNING COMMISSION (MPC) - MPC researches and analyzes housing related

information for technical reports and long range planning documents. They maintain a GIS computerized mapping and information system as well as a neighborhood data base. MPC also conducts historic sites surveys and conducts local historic reviews under the City's Memorandum of Agreement with the State Historic Preservation Officer.

MPC is responsible for zoning and subdivision regulations. MPC develops short and long range plans for all City and County sectors and works closely with the City and the County in the development of plans and strategies for neighborhood improvement.

MPC provided significant staff support for the development of the Empowerment Zone Strategic Plan and is expected to assist in ongoing planning and evaluation efforts related to the EZ. MPC also participates in the Bicentennial Neighborhood Initiative Task Force.

THE DEVELOPMENT CORPORATION OF KNOX COUNTY (TDC) - This is the County's lead entity for the development of priorities and strategies for the Consolidated Plan for Knox County. TDC worked in cooperation with the City to sponsor round-table discussions that formed the basis of much of the consultation process.

TDC is responsible for administering federal housing funds which the County receives as an entitlement. These funds include the Community Development Block Grant Program and HOME funds received from the State. TDC also applies for and receives state HOUSE Entitlement funds which it primarily uses to provide housing rehabilitation financing. Assistance is available for owner-occupied property.

TDC participates in the Knox Housing Partnership and the Bicentennial Neighborhood Initiative Task Force. Knox County, through TDC, is a sponsoring entity of the Knoxville/Knox County Empowerment Zone and will be involved in the planning and implementation of the EZ.

TENNESSEE HOUSING DEVELOPMENT AGENCY (THDA) – THDA is the State Housing Finance Agency and also administers a State Housing Trust Fund called the HOUSE Program. Under the Great Rate Program, THDA provides below-market rate mortgage loans using tax exempt financing. These loans are originated by local lending institutions and mortgage companies. HOUSE funds will not be available for fiscal year 2000 since the State Legislature redirected tax revenue dedicated to HOUSE to the State General Fund. In place of HOUSE, THDA is offering the THDA Grant Program, which will provide funds by formula to the City of Knoxville under the local match component. The THDA Grant Program will also provide funds for single-family development on a competitive basis through the Great Place Program component. THDA provided a \$2 million grant to implement the Bicentennial Neighborhood Initiative in the Vestal Neighborhood.

Public/Private Nonprofit Organizations: CDBG/ESG Subrecipients and HOME CHDOs

BECK CULTURAL EXCHANGE CENTER – This organization was established for the acquisition, preservation, and exposition of artifacts, pictures, and other evidence of contributions made by African-American citizens in Knoxville and surrounding areas. Over its 25 year history, the Center has provided information to approximately a half million people on the rich history of African-Americans. Beck Cultural Exchange Center will be a CDBG subrecipient in PY2000 to undertake a renovation of its existing facility.

CENTER FOR NEIGHBORHOOD DEVELOPMENT (CND) – The Center, a spin-off of the Partnership for Neighborhood Improvement, works to build the capacity of community-based organizations to improve their neighborhoods. CND provides assistance to neighborhoods in organizing, planning, and projects to improve neighborhoods. Programs the Center offers include: Community

Resource Program - provides workshops and one-on-one technical assistance in the areas of organizational development and management; Transforming Neighborhoods Together (TNT) – a self-directed, long-term, strategic planning program that results in a neighborhood plan for future development, including housing; Neighborhoods Small Grants Program (in partnership for the East Tennessee Foundation) - offers small grants (up to \$5,000) along with technical assistance to resident controlled, community-based organizations working on neighborhood improvement projects, including housing. CND will be undertaking the organization of six Zone Advisory Councils (ZACs) which will be the primary means of expanding community involvement and citizen participation in the Knoxville/Knox County Empowerment Zone.

CND works closely with the Knox Housing Partnership on neighborhood involvement and in the Bicentennial Neighborhood Initiative Task Force. CND is a PY2000 CDBG subrecipient to undertake the projects described above. CND is identified in the Empowerment Zone Strategic Plan as a lead implementing entity for several projects: organizing and staffing the ZACs as part of the governance operations; developing and operating Neighborhood Resource Centers and Neighborhood Builders College as well as expanding the Transforming Neighborhoods Together Program; implementation of these EZ projects will depend upon appropriation of funding by Congress.

CHILD AND FAMILY TENNESSEE – Child and Family is a comprehensive social services agency which aims to preserve and strengthen family life. It operates several facilities which house the homeless or persons in a crisis situation. These include (1) Runaway Youth Shelter; (2) Kent C. Withers Family Crisis Center; (3) Independent Living Program for Adolescents and Young Adults; (4) Haslam and Cooper House Psychiatric Facilities for adolescents; (5) Group homes for adolescents; (6) Pleasantree Apartments, permanent housing for single women, suffering from emotional/mental disabilities, and their children; (7) a Homeless Young Adult

Transitional Living Center, which provides housing (through a combination of group homes, scattered site units, and host homes), skill development, and employment training for young people with a history of homelessness; and (8) Great Starts, which provides residential treatment and services for up to one year for chemically dependent female heads of households and their drug-affected children. The agency participates on the Knoxville Coalition for the Homeless. They have used funds provided through the Stewart B. McKinney Act for some of their projects. Child and Family qualifies as a CHDO under the HOME program.

EAST TENNESSEE COMMUNITY DESIGN CENTER – The Design Center offers design assistance to nonprofits and neighborhood organizations. This assistance is often used by nonprofits studying the feasibility of housing projects. The Design Center created a subsidiary, the East Tennessee Housing Development Corporation, to act as a housing developer.

The Design Center participates in the Bicentennial Neighborhood Initiative Task Force. The organization will be a PY2000 CDBG subrecipient to continue providing design and technical assistance, especially for projects related to the Bicentennial Neighborhood Initiative and that improve EZ neighborhoods. The Design Center is identified in the EZ Strategic Plan as a lead implementer on the Inner-Net project and as a partner on several other projects; implementation of these projects depends upon funding being appropriated by Congress.

KNOX COUNTY DISMAS HOUSE – Dismas House is a program that offers transitional housing to ex-offenders, including homeless ex-offenders. Dismas House also offers referrals for substance abuse counseling, medical and legal assistance, employment and permanent housing. Participants in the program are requested to stay in the program a minimum of three months. There is no maximum time to stay as the program is quite flexible according to client's needs. Dismas House will be an ESG

subrecipient in PY2000, receiving funds to operate their facility.

KNOX HOUSING PARTNERSHIP (KHP) - The Knox Housing Partnership is a spin-off of the Partnership for Neighborhood Improvement. KHP is a nonprofit organization formed in response to the local problems of substandard housing conditions and lack of affordable housing opportunities for low income households. The mission of the Knox Housing Partnership is to provide the opportunity for affordable and desirable housing for all low income residents of Knoxville and Knox County. Board members include: lenders, government, the private housing industry, major corporations, for-profit developers, nonprofit developers, foundations, community and social action agencies, community representatives and advocates, legal representatives, and at-large representatives.

Activities of KHP include the FirstHome homeownership training program, an intake/screening/training process for low- to moderate-income home buyers, development of rental housing, and housing for homeownership. KHP is also a recipient of a HOPE 3 grant which is being administered by the City of Knoxville Community Development Division. KHP is presently involved in the rehabilitation of 146 homes as part of its New Horizons Project. KHP is the developer on this project being undertaken in partnership with Knoxville's Housing Development Corporation (KHDC, a subsidiary of KCDC) with funding from eight lending institutions, the Affordable Housing Trust Fund, and the City of Knoxville; the homes were acquired from the Monday Estate and will be sold whenever possible to the current tenants.

The Knox Housing Partnership participates on the advisory committee of the Partnership for Neighborhood Improvement and chairs the Bicentennial Neighborhood Initiative Task Force. KHP qualifies as a Community Housing Development Organization (CHDO) under the HOME Program and will receive CHDO operating funds in PY2000. KHP will be a CDBG subrecipient for PY2000 to continue its FirstHome

homeownership training program. The Empowerment Zone Strategic Plan identifies KHP as the lead implementer for a Comprehensive Homeownership Training program; KHP is also identified as a participant in other housing-related EZ projects. Implementation of these projects will depend upon appropriation of funding by Congress for implementation of EZ plans.

KNOXVILLE HABITAT FOR HUMANITY – Knoxville Habitat for Humanity builds homes with the help of Covenant Partners who sponsor houses providing funding and volunteer labor. Homebuyers are low to moderate income households who are able to pay a 20 year mortgage at 0% interest, have a need for housing, and are willing to partner with Habitat through sweat equity and attendance at homeownership classes that include budgeting and home maintenance training. Knoxville Habitat is an affiliate of Habitat for Humanity International. The ultimate goal of Habitat is to eliminate poverty housing and homelessness from the face of the earth by constructing and building adequate and basic housing. Knoxville Habitat for Humanity has been the primary developer of lots acquired and sold through the Blighted Property/Homemakers activities, contributing significantly to the revitalization efforts in Mechanicsville and Vestal. Habitat is represented on the Board of the Knox Housing Partnership and the Bicentennial Neighborhood Task Force.

KNOXVILLE/KNOX COUNTY COMMUNITY ACTION COMMITTEE (CAC) - CAC operates a variety of service programs and is an important link in the coordination of social services and housing. It has been the designated Community Action Agency for Knox County since 1964. It has more than 35 years of experience bringing together public officials, the community at large, and low-income representatives to address difficult and important community problems.

Housing activities include a *Minor Home Repair* program which is funded by both the City and the

County as well as the Affordable Housing Trust Fund, a *Weatherization* program, and *Energy Assistance*. The major focus is on elderly or handicapped households. Approximately 220 homes are weatherized (rental and owner) and 290 homes repaired in a year.

CAC has a *Homeward Bound* program to help the homeless break the cycle of dependence and become self-sufficient. *Homeward Bound* provides basic skills, GED, literacy, comprehensive family development planning, life skills development, budgeting, employability, and supportive services to allow the very low income at risk of homelessness to develop career-oriented skills, permanent housing, and self-sufficiency. *Families in Need* provides homeless families with case management, comprehensive family development planning, supportive services, and life skills training to prepare for and maintain permanent housing. *Counseling and Recovery Services* provide individual outpatient and group counseling with case management for the chemically dependent, as well as counseling to address family, overeating, anger control, and codependency issues. *REACH* is a homeless outreach program offering case management, life skills, and educational services to those who are living on the streets, in parks, in cars, or in other places not intended for human habitation. *Project Succeed* is an outreach, case management, housing, and job training program operated in area shelters by CAC. *Refugee Social Services* is a social readjustment program and an English as a Second Language program for low income political refugees who have been in the country less than five years. *Stranded Travelers Program* assists individuals and families who become stranded in Knox County as a result of vehicle breakdown or theft of bus tickets. *Knox County Family Assistance* is a series of programs providing assistance on rent, mortgages, utility bills, and school supplies.

CAC operates *Neighborhood Centers* to provide emergency services, case management, information and referral, and a range of social services to limited income people. *Head Start* is a comprehensive development program for preschool children and

their families who meet income guidelines. The *Office on Aging* administers programs and provides technical assistance for programs serving the elderly. The *Workforce Investment Board (formerly the Private Industry Council/JTPA)* is an employment and training program designed to serve low income citizens. The *Office of Community Services* implements a variety of nutrition services and garden programs for low income citizens.

CAC participates in the Knoxville Coalition for the Homeless. CAC is a PY2000 subrecipient for both CDBG funds (to operate the Minor Home Repair Program) and ESG funds (to operate the Homeward Bound program). CAC is also identified as an implementer of an Urban Farm project in the Empowerment Zone Strategic Plan; implementation of this project will depend upon appropriation of funding for EZs by Congress.

KNOXVILLE LEADERSHIP FOUNDATION (KLF) – KLF’s mission is to “enable the inner-city of Knoxville by connecting communities of resources with communities of need while reconciling people to Jesus Christ and to each other.” They have worked for the past six years to connect urban leaders, neighborhoods, and churches to the systems and resources of our City to build a healthy Knoxville community. KLF aims to be a bridge building organization that creates long-term efforts to address urban needs.

KLF will be a PY2000 CDBG subrecipient to undertake a minor home repair program in the Five Points community.

LYONS VIEW HOUSING AND LAND TRUST CORP. - This volunteer organization serves families in the Lyons View neighborhood in Knoxville. Their activities include development of housing through both rehabilitation and new construction, and housing counseling. They are trying to address neighborhood needs related to substandard housing, overcrowding, high rents and encroachment of commercial ventures. They have qualified and previously received funding as a CHDO.

HELEN ROSS MCNABB CENTER – This is a comprehensive community mental health center for the diagnosis, treatment, and prevention of mental illness. Fees are based upon a sliding scale schedule according to income and size of family. Funding is provided by United Way of Greater Knoxville, TN Department of Mental Health/Mental Retardation, Knox County and Knoxville City governments, fees, contracts, and grants. The Helen Ross McNabb Center provides direct outreach services to area emergency shelters with counselors and case managers. Helen Ross McNabb is working to better integrate the mentally ill into the community through case management and by renting and subleasing housing units to their clients.

Helen Ross McNabb Center participates on the Knoxville Coalition for the Homeless. The Center will be an ESG subrecipient for PY2000 to continue to provide an adult homeless mental health liaison. Helen Ross McNabb Center is also identified in the Empowerment Zone Strategic Plan as a lead implementing entity for the Healthy Starts Program; implementation of this project depends upon Congressional appropriation of funding for the Empowerment Zone program.

VARIOUS NONPROFIT AND FOR-PROFIT HOUSING DEVELOPERS – A variety of for-profit housing developers and nonprofit organizations (including Greater Bush Grove Community Development Corporation, Helen Ross McNabb Center, Knoxville Habitat for Humanity, and Wesley House) have received properties through the City’s Homemakers Program, which is the City’s mechanism for disposing of properties acquired through the Blighted Property Acquisition Process. These entities commit to undertaking suitable redevelopment of the property within a specified time period in order to clear the blighting conditions.

VOLUNTEER MINISTRY CENTER (VMC) – The Volunteer Ministry Center provides meals, a day shelter and a full range of support services, including job referral, case management, permanent housing

referral and up-front rental assistance. The day shelter provides a public shower and clothes washing services. They also operate a 16 unit Single Room Occupancy (SRO) for homeless men. The SRO is assisted through the Moderate Rehab for SROs Program.

VMC participates in the Knoxville Coalition for the Homeless. The agency will be an ESG subrecipient in PY2000 to continue to operate their day shelter and for CDBG funds to operate their Point Program in the day shelter.

VOLUNTEERS OF AMERICA (VOA) - Volunteers of America provides shelter and supportive services to families with children and single women. The shelter's capacity is 110 beds for 20 families; 30-40 single women. Three meals a day, seven days a week are provided. Supportive services include case management, permanent housing referral, and adult basic education. Length of stay is determined by need. They have used funds provided through the Stewart B. McKinney Act for some of their projects. VOA serves over 700 single women and 500 families in a year (2,376 total persons).

VOA participates in the Knoxville Coalition for the Homeless. The agency will be an ESG subrecipient for PY2000 to continue to operate their shelter.

THE YOUNG WOMEN'S CHRISTIAN ASSOCIATION (YWCA) - YWCA provides low cost transitional housing to single women who may otherwise be homeless. The women participate in a program designed to bridge the gap between homelessness and independent living. There is no minimum length of stay, but the women must work with the transitional housing coordinator to establish goals and a workable plan of achievement. Other services that are available are: on-site GED training, individual and group psychological counseling services, employment referral, and referral to other social services agencies when necessary. The Phyllis Wheatley Branch of the YWCA provides a variety

of community programs/services to the East Knoxville community.

The YWCA will be a CDBG subrecipient in PY2000 to undertake life/safety renovations to the Phyllis Wheatley Branch. The agency will be an ESG subrecipient in PY2000 to carry out renovations to the downtown housing facility.

Private Sector: Lender Partners in KHP FirstHome Program

AMSOUTH (formerly First American National Bank) - participates in the Knox Housing Partnership (KHP) and the Partnership for Neighborhood Improvement. They offer special financing incentives for low and moderate income homeowners. The Affordable Mortgage Loan program offers loans at special terms to low and moderate income households. Affordable Home Improvement Loans for Low and Moderate Income Homeowners offers loans of up to \$5,000 to low and moderate income homeowners to repair, modernize, or remodel their homes. AmSouth is a participating lender in the City's COMBO Loan Program and the Knox Housing Partnership's FirstHome Program. AmSouth participated in the creation of the Community Investment Fund, which provides below-market rate funding for housing and economic development initiatives. AmSouth is a partner in Bringing Home the Badge, a program operated by Knox Housing Partnership in partnership with the City of Knoxville, the Knoxville Police Department, the Center for Neighborhood Development, and AmSouth; the program is designed to increase neighborhood safety and promote homeownership by encouraging patrol officers to purchase and rehabilitate homes in the Empowerment Zone. AmSouth is a participating lender for the New Horizon Homes project of Knoxville's Housing Development Corporation (KHDC, a subsidiary of KCDC)) and the Knox Housing Partnership; the participating lenders provided KHDC with an acquisition/construction loan at below market interest rates.

BANKFIRST - participates in the Knox Housing Partnership's FirstHome Program and is a participating lender for the New Horizons Homes project. BankFirst offers the Welcome Home downpayment assistance program and sponsored a Federal Home Loan Bank Affordable Housing Program application with Knox Housing Partnership to obtain below-market financing for KHP's purchase of 20 New Horizon rental houses.

BANK OF AMERICA (formerly Nationsbank) - offers the CRA Mortgage Product for owner-occupied single family dwellings, and for owner-occupied duplexes on a case-by-case basis. Step rate loan is available where the note rate is decreased 2% the first year and 1% the second year with the buyer to qualify at the first year rate.

CHARTER FEDERAL SAVINGS BANK - offers the Affordable Housing Loan Program for purchase of single-family dwellings. Below market rates and no closing costs or points are offered to those with household income under \$30,000.

FIRST TENNESSEE BANK - participates in the Knox Housing Partnership and the Partnership for Neighborhood Improvement. They offer special financing incentives for low and moderate income home owners through their Neighborhood Revitalization Program. First Tennessee will offer a rate discount of up to 1% to eligible borrowers who would not otherwise qualify for the requested mortgage or home improvement loan. Mortgage loans will be made under FHA Sections 221 and 203 programs, and combination purchase and rehabilitation loans will be made under a new in-house purchase/rehab program. First Tennessee is a participating lender in the City's COMBO Loan Program and the Knox Housing Partnership's FirstHome Program. First Tennessee participated in the creation of the Community Investment Fund and is a participating lender to the New Horizons Homes project.

FIRST VANTAGE BANK (formerly First Knoxville Bank) - participates in the Knox Housing Partnership and is a participating lender in the

FirstHome Program, the Knox County Buyers Assistance Program, and the City's COMBO Loan Program. First Vantage participated in the creation of the Community Investment Fund and is a participating lender for the New Horizon Homes project.

HOME FEDERAL BANK - offers the "HomeTown" Affordable Housing Program for borrowers below 80% of median income, with rates up to ½% below current market rates for 97% loan-to-value purchases of homes. In addition, Home Federal has an Affordable Home Improvement Loan Program for borrowers below 80% of median income. This unsecured loan is fixed rate with no closing costs and extended terms. Home Federal is also a FannieMae approved lender for their Community Homebuyer Programs and offers THDA financing. Home Federal participates with the Partnership for Neighborhood Improvement, Knox Housing Partnership's FirstHome Program, the City's COMBO loan program, and the Community Investment Fund. Home Federal has secured grants from the Federal Home Loan Bank of Cincinnati (FHLBC) for Habitat for Humanity and is administering a joint program between the FHLBC and the Tennessee Network for Community Economic Development for low-interest loans for the mentally disabled. Home Federal is also a participating lender for the New Horizons Homes project.

NBC - participates on the Knox Housing Partnership. NBC participated in the creation of the Community Investment Fund, is a lender partner for the KHP FirstHome program, and is a participating lender for the New Horizon Homes project.

SUNTRUST BANK (formerly Third National Bank) - participates in the Partnership for Neighborhood Improvement and the Knox Housing Partnership. They offer special financing incentives for low and moderate income homeowners through their Community House Loan Program. This is a fund of \$20 million committed for reinvestment in designated low and moderate income property tracts. The program is available for first mortgages, home

improvements, small businesses and loan counseling services. SunTrust is a participating lender in the City's COMBO Loan Program and the Knox Housing Partnership FirstHome Program. They participated in the creation of the Community Investment Fund and are a participating lender for the New Horizon Homes project.

UNION PLANTERS BANK - offers its Community Reinvestment Home Loan program for residents in low to moderate income neighborhoods. Loans are offered for owner-occupied properties and may be used for purchase, refinance, rehab or home improvement. Special terms include a discounted interest rate, no points and no origination fee. Union Planters participates in the Knox Housing Partnership's FirstHome Program and are a participating lender for the New Horizon Homes project.

Coordination of Empowerment Zone Implementation: The Partnership for Neighborhood Improvement

THE PARTNERSHIP FOR NEIGHBORHOOD IMPROVEMENT (PNI) – PNI was formed as part of an effort to encourage cooperation among the public sector, the financial community, other private sector entities, and Knoxville's low- to moderate-income neighborhoods, to develop new resources for improvement of Knoxville's low- to moderate-income neighborhoods. PNI is the governing board of the Knoxville/Knox County Empowerment Zone and, as such, is responsible for overseeing and implementing the EZ Strategic Plan, the Prospectus for Empowerment. The PNI Board is composed equally of residents of Knoxville's low- to moderate-income neighborhoods (especially the Empowerment Zone neighborhoods) and resources from the broader community.

The organizations currently represented on the PNI Board are listed below:

CITY OF KNOXVILLE DEPARTMENT OF DEVELOPMENT – See description earlier in this section under **Public Agencies**.

CORNERSTONE FOUNDATION OF KNOXVILLE – This organization is a privately funded philanthropic foundation whose purpose is to “serve as a catalyst to help reach our God-given potential as a community.” Its strategic priorities include: long term investment in kids (education initiatives, etc.), community-oriented leadership development, downtown revitalization, job creation, and protection of natural assets. Cornerstone has pledged to coordinate its grant-making efforts with the implementation of the Empowerment Zone.

COUNCIL OF INVOLVED NEIGHBORHOODS (COIN) – COIN is a coalition of neighborhood organizations joined together in support of each other. Its primary purpose is to enhance the quality of life in Knoxville's neighborhoods. COIN appoints half of the members of the Partnership for Neighborhood Improvement Board of Directors and also appoints members to the PNI EZ Planning and Implementation and Evaluation Committees and the Center for Neighborhood Development Board of Directors. The COIN representatives currently serving on the PNI Board come from the following COIN member organizations: Morningside Heights Homeowners Association, East Area Advisory Council, Vestal Community Organization, Parkridge Community Organization, Restoration Outreach, Lonsdale community, and West View Community Action Group.

EAST TENNESSEE FOUNDATION – This community foundation is the fund administrator for the Affordable Housing Trust Fund and the Community Investment Fund. The Foundation was active in setting up the funding and development of the Knox Housing Partnership. The Foundation provides technical assistance to nonprofits and administers a Neighborhood Small Grants Program with the Center for Neighborhood Development. The Foundation is currently represented on the Partnership for Neighborhood Improvement board.

The Affordable Housing Trust Fund (AHTF) was created as a demonstration fund in 1993, funded by KCDC with proceeds from their Turnkey III program

and by the City of Knoxville with UDAG repayments. The funds was made permanent in 1997 and has received annual funding from the City of Knoxville. The Affordable Housing Trust Fund Advisory Board for the fund is appointed by the City of Knoxville (4 members), KCDC (4 members), and PNI (3 members).

The Community Investment Fund (CIF) was initiated by PNI and initially capitalized with investments by six banks (First American Bank (now AmSouth), First Tennessee Bank, First Vantage Bank, Home Federal Bank, NBC Knoxville Bank, and SunTrust Bank). The purpose of the CIF is to provide low-interest short-term predevelopment, development, construction, and economic development loans to nonprofit and for-profit housing and community-based development organizations. A Loan Committee reviews and makes decisions on applications to the fund; investors to the fund appoint four members to the Loan Committee, while PNI appoints the remaining three members.

FIRST TENNESSEE BANK – See description earlier in this section, **under Private Sector: Lender Partners.**

KCDC – See description earlier in this section under **Public Agencies.**

RESTORATION OUTREACH – This is the community development corporation associated with Eternal Life Church. Their earliest projects were two youth groups, the *Rock Group* and the *Precious Stones*, to address issues of violence, drugs, gangs, drive-by shootings and broken, nontraditional families which plague inner city youth. Restoration Outreach is active in revitalization of Mechanicsville and has become involved in a variety of projects including development of a medical clinic in Mechanicsville and workforce development and substance abuse treatment projects. Restoration Outreach is involved in the Council of Involved Neighborhoods and is one of the COIN representatives currently serving on the Partnership for Neighborhood Improvement.

SUNTRUST BANK – See description earlier in this section, **under Private Sector: Lender Partners.**

Numerous other organizations (including the University of Tennessee, Pellissippi State Technical Community College, Knoxville Legal Aid Society, Knoxville’s Promise, Project Change, the Metropolitan Planning Commission, Associated Catholic Charities of East Tennessee, CAC, and many more) are represented on various committees and working groups. The organizations listed below are identified in the Empowerment Zone Strategic Plan as lead implementing entities for Years 1 and 2 of Empowerment Zone designation or as partners in implementation. Implementation of the plan depends upon funding appropriated by Congress for EZ implementation; as of early 2000, only \$6.66 million per EZ has been appropriated.

Lead Implementing Entities for the Empowerment Zone, Year 1 and Year 2 Projects

Bicentennial Neighborhood Initiative Task Force is identified as a lead implementing entity for the Comprehensive Revitalization Efforts project.

Center for Neighborhood Development is identified as the lead implementing entity for the Neighborhood Builders College, Neighborhood Resource Centers, and Transforming Neighborhoods Together programs, and for the ZAC portion of the governance plan.

City of Knoxville is identified as the lead implementing entity for Redevelopment of Brownfields, HOPE VI Neighborhood Commercial Development, Mixed Income Financing, and Improving Rental Housing projects and for the fiscal agent/grantee portion of the governance plan.

The Disability Resource Center is identified as the lead implementing entity for Accessible Housing and Outreach to Persons with Disabilities projects.

East Tennessee Community Design Center is identified as the lead implementing entity in the Inner-Net project.

The Heart of Knoxville Image Committee is identified as the lead implementing entity for the Family Reunion Destination project.

KCDC is identified as a lead implementing entity for the Empowerment Bank Investment Shop (via its Economic Ventures subsidiary).

Knox Heritage is identified as the lead implementing entity for the Preservation-based Housing Rehabilitation project.

Knox Housing Partnership is identified as the lead implementing entity for Comprehensive Homeownership Preparation.

Knoxville/Knox County CAC is identified as the lead implementing entity for the Urban Farm and the Schools of Promise.

Helen Ross McNabb Center is identified as the lead implementing entity for the Healthy Start program.

The Partnership for Neighborhood Improvement is charged with identifying a lead implementing entity for the Housing Resource Center, with developing a private funding source for the Mixed Income Financing Program, and with developing a plan for Workforce Competitiveness; it is identified as the lead implementing entity for overall oversight and implementation of the EZ Strategic Plan.

Pellissippi State Technical Community College is identified as a lead implementing entity for the Empowerment Bank Investment Shop (via its Small Business Development Center) and for the Workforce Competitiveness program.

The University of Tennessee is identified as the lead implementing entity for the Community-University Links project.

Youth, Environment, and Services (YES) Committee is identified as the lead implementing entity for the Neighborhood-based Environmental Cleanup project.

Partners in Implementation for the Empowerment Zone

ADF Corporation is identified as a partner in the Inner-Net project.

African-American Appalachian Arts is identified as a partner in the Family Reunion Destination project.

Beck Cultural Exchange Center is identified as a partner in the Family Reunion Destination project.

The Center for Neighborhood Development is identified as a partner in the Family Reunion Destination project.

The City of Knoxville is identified as a partner in the Inner-Net, the Urban Farm, Comprehensive Revitalization Efforts, Comprehensive Homeownership Preparation, Workforce Competitiveness, Neighborhood Resource Centers, and Transforming Neighborhoods Together projects.

Community Housing Resource Board is identified as a partner in Comprehensive Homeownership Preparation.

Consumer Credit Counseling is identified as a partner in Comprehensive Homeownership Preparation.

The Council of Involved Neighborhoods is identified as a partner in the Neighborhood Resource Centers and Family Reunion Destination projects.

The Disability Resource Center is identified as a partner in the Neighborhood Builders College.

East Tennessee Community Design Center is identified as a partner in Comprehensive Revitalization Efforts.

Homebuilders Association is identified as a partner in Comprehensive Homeownership Preparation.

Junior Achievement is identified as a partner in the Urban Farm and Comprehensive Homeownership Preparation projects.

KCDC is identified as a partner in HOPE VI Neighborhood Commercial Development, Comprehensive Revitalization Efforts, Comprehensive Homeownership Preparation, and Workforce Competitiveness projects.

Knox County is identified as a partner in Comprehensive Revitalization Efforts.

Knox County Schools is identified as a partner in Comprehensive Homeownership Preparation, Schools of Promise, and Neighborhood Builders College programs.

Knox County Tourist Commission is identified as a partner in the Family Reunion Destination project.

Knox Housing Partnership is identified as a partner in the Mixed Income Financing and Comprehensive Revitalization Efforts.

Knoxville Advisory Council for the Handicapped is identified as a partner for the Outreach to Persons with Disabilities project.

Knoxville Area Chamber Partnership is identified as a partner in the Family Reunion Destination project.

Knoxville Area Transit (KAT) is identified as a partner in Workforce Competitiveness.

Knoxville Area Urban League is identified as a partner in Comprehensive Homeownership Preparation and Neighborhood Resource Centers.

Knoxville Coalition for the Homeless is identified as a partner in Accessible Housing.

Knoxville College is identified as a partner for the Neighborhood Builders College.

Knoxville/Knox County CAC is identified as a partner in Accessible Housing (via its Office on Aging).

Knoxville Habitat for Humanity is identified as a partner in Comprehensive Revitalization Efforts and

Comprehensive Homeownership Preparation.

Knoxville Police Department is identified as a partner in the Neighborhood Resource Centers.

Knoxville Utilities Board is identified as a partner in Comprehensive Homeownership Preparation.

Metropolitan Planning Commission is identified as a partner in Comprehensive Revitalization Efforts.

Morningside Heights Homeowners Association is identified as a partner in the Family Reunion Destination project.

Network Inner City Schools is identified as a partner in the Schools of Promise program.

The Oak Ridge Centers for Manufacturing Technology are identified as a partner in the Inner-Net.

The Partnership for Neighborhood Improvement is identified as a partner in the Improving Rental Housing project.

Pellissippi State Technical Community College is identified as a partner in the Neighborhood Builders College.

Senior Citizens Home Assistance is identified as a partner in Accessible Housing.

The University of Tennessee is identified as a partner in the Neighborhood Builders College and Neighborhood Resource Centers.

Coordination of Homeless Assistance:

The Knoxville Coalition for the Homeless

THE KNOXVILLE COALITION FOR THE HOMELESS – The Knoxville Coalition for the Homeless was established in 1985 by the Knox County Executive and Knoxville’s Mayor to work towards the elimination of homelessness in Knoxville. The Coalition is made up of representatives of the different housing and service

providers for the homeless, as well as local government and current or former members of the homeless community. In addition to coordinating the provision of shelter and services to those who do not have a permanent place to live, the Coalition has developed a clear understanding of the level of the homeless problem in Knoxville and Knox County. This has been done through the sponsorship of several studies since 1985. It has also been an important forum for communication among the members of the community who work to improve the lives of the homeless.

The following organizations (in alphabetical order) are currently on the membership/meeting notice list for the Knoxville Coalition for the Homeless:

- Associated Catholic Charities of ET
- Catholic Diocese of Knoxville
- Cherokee Health Systems
- Child and Family, Inc.
- City of Knoxville - Administration
- City of Knoxville - Community Development
- Covenant Health
- Disability Resource Center
- EM Jellinek Center
- East Tennessee Human Resource Agency
- Friends of Lakeshore, Inc
- Helen Ross McNabb Center
- KCDC
- Kent C Withers Family Crisis Center
- Knox Area Rescue Ministries
- Knox County - Health Department
- Knox County CD & Housing Div.
- Knox County CD & Housing Division
- Knox County Dismas House
- Knox County Schools
- Knoxville Area Chamber Partnership
- Knoxville Area Urban League
- Knoxville Legal Aid Society, Inc.
- Knoxville Police Department
- Knoxville-Knox County CAC
- Lakeshore Mental Health Institute
- Lost Child Evangelistic Ministry
- Lost Sheep Ministry
- Midway Rehabilitation Center
- National Alliance for Mentally Ill
- National Alliance for Mentally Ill of Knoxville

- Office of the District Public Defender
- Positively Living
- Public Defenders Office
- Recovery Support Systems, Inc.
- Rogers-Culliver Supportive Living
- Samaritan Place
- TN House of Representatives
- TN Mental Health Consumers Assoc.
- Tenn Corp. Community Services, Inc.
- The Salvation Army
- US Dept of Housing & Urban Development
- US Veterans Admin Vet Center
- UT College of Nursing
- UT College of Social Work
- United Way of Greater Knoxville
- Volunteer Ministry Center
- Volunteers of America
- YWCA

Coordination of Revitalization Activities in Vestal: The Bicentennial Neighborhood Initiative Task Force

THE BICENTENNIAL NEIGHBORHOOD INITIATIVE TASK FORCE – The Bicentennial Neighborhood Initiative (BNI) Task Force is the coordinating body for implementation of the State Bicentennial Neighborhood Initiative. The Task Force is chaired by Knox Housing Partnership, and includes representatives from government, housing, community development, and resident organizations that have a role to play in the revitalization of the Vestal neighborhood.

The following organizations are currently participating in the Bicentennial Neighborhood Initiative Task Force:

- Knox Housing Partnership (Chair)
- Center for Neighborhood Development
- City of Knoxville
- East Tennessee Community Design Center
- Knox County
- Knoxville Habitat for Humanity
- Knoxville's Community Development Corporation (KCDC)
- Metropolitan Planning Commission
- Partnership for Neighborhood Improvement
- U.S. Department of Housing and Urban

Development

- Vestal Community Organization

Promoting Housing Equality: The Community Housing Resource Board

THE COMMUNITY HOUSING RESOURCE BOARD (CHRB) – The Community Housing Resource Board is comprised of persons who represent housing-related organizations, social service agencies, educational institutions, and advocacy groups. The CHRB is committed to promoting housing equality through the implementation of special projects which market equal opportunity legislation. CHRB is a co-sponsor of the Fair Housing and Equal Opportunity Conference and the Brotherhood/Sisterhood Essay Contest.

The following organizations are currently participating in the Community Housing Resource Board:

- Apartment Association of Greater Knoxville
- Center for Neighborhood Development
- City of Knoxville, Department of Development
- Development Corporation of Knox County
- Disability Resource Center
- Family Crisis Center
- Knox County Housing Authority
- Knox County Schools
- Knox Housing Partnership
- Knoxville Area Urban League
- Knoxville/Knox County Community Action Committee
- Knoxville Legal Aid Society
- Knoxville Project Change
- Knoxville Tenant Council
- Knoxville's Community Development Corporation
- League of Women Voters
- National Conference for Community and Justice
- Realtor's Association
- Tennessee Human Rights Commission
- University of Tennessee
- Volunteers of America
- Concerned citizens

Assessing the strengths and gaps in the delivery system – The multitude of organizations providing housing, housing assistance and supportive services in Knoxville/Knox County are capable of delivering the essential services to households in need. The greatest strengths of our institutional structure are the commitment of the agencies to serve and their cooperative spirit and willingness to participate in partnership efforts. Major gaps that exist include: (1) inadequate resources to address local needs, including lack of full funding for and uncertainty over the future funding of the Empowerment Zone; (2) enough capable nonprofits to develop/manage affordable housing, (3) funding for operations and supportive services to make it feasible for entities to: a)develop single room occupancy housing for single homeless and non-homeless low income persons, that includes appropriate supportive services; b)develop and manage affordable assisted living for seniors; c)develop rental housing for released prisoners; (4) deinstitutionalization of mental health patients from local State funded facilities without the availability of alternative housing; and (5) Zone Advisory Councils (ZACs) not yet in place to give input on Empowerment Zone priorities.

The organizational relationship between the jurisdiction and the public housing authority – KCDC is a multipurpose agency conducting housing, redevelopment, and social programs. KCDC is the Public Housing Agency (PHA) for the City and as such, owns and manages the public housing stock. KCDC is the City's redevelopment agent. The Mayor of the City of Knoxville appoints the seven member KCDC Board of Directors. There is no relationship between the City and KCDC regarding hiring, contracting, and procurement. The City provides \$75,000 in funding to operate recreation programs in some of KCDC's developments each year and funds a redevelopment contract under which KCDC acts as the agent of the City for redevelopment activities. Knoxville's City Council approves redevelopment plans to be implemented by KCDC.

Actions to overcome gaps in the institutional structure for carrying out its strategy for addressing priority needs – One of the major activities to overcome gaps in the institutional structure will be the full implementation of the governance structure of the Empowerment Zone plan. Over the next year, the six ZACs will be established and trained; the Center for Neighborhood Development will facilitate this process and provide staff support. The ZACs will provide a means for the residents, neighborhood organizations, businesses, faith-based congregations, nonprofit organizations, schools, and other stakeholders to become involved in the Empowerment Zone. The ZACs will look at the needs and desires of their local areas and make recommendations to PNI about the implementation of existing programs and the needs for future programs.

IV. COORDINATION

Activities to enhance coordination – The City activities to enhance coordination between public and assisted housing providers and private and governmental health, mental health, and service agencies are carried out through:

- Participation on the Knoxville Coalition for the Homeless. The Coalition includes representatives from all these organizations and works to coordinate activities so that needs can be identified and strategies developed to meet those needs and duplication prevented wherever possible.
- Participation on the Knoxville Housing Partnership. This organization brings together the private sector and nonprofit organizations involved in housing. KHP is taking on the role of a housing developer so as to be in a position to meet identified gaps in the housing delivery system, but will also keep its coordination role.
- Participation on the Partnership for Neighborhood Improvement. PNI is a comprehensive cooperative effort (described in detail in the Non-housing

Community Development Plan) among government, local financial institutions, technical assistance providers, and low income neighborhood representatives. PNI works to develop new resources for the improvement of low income neighborhoods; it is the umbrella organization that led to the creation of the Knox Housing Partnership, the Affordable Housing Trust Fund, the Community Investment Fund, and the Center for Neighborhood Development. It is the governing board of the Knoxville/Knox County Empowerment Zone.

- Participation in the Bicentennial Neighborhood Initiative Task Force. The BNI Task Force coordinates implementation of the BNI Plan for the Vestal Neighborhood and enhances communications with residents of the neighborhood.
- Participation in the Community Housing Resource Board which promotes equal housing opportunity for all citizens and co-sponsors the annual Fair Housing and Equal Opportunity Conference.
- Participation in the Dr. Martin Luther King, Jr. Commemoration Commission which coordinates activities for the Dr. Martin Luther King, Jr. Holiday observance, and provide support for the annual Fair Housing and Equal Opportunity Conference as well as other diversity-related functions.
- Provision of information to the new Just Ask 211, which is currently being organized as a comprehensive centralized information and referral service.

Metropolitan/regional connections – The governance structure of the Knoxville/Knox County Empowerment Zone links several neighborhoods with common issues into Zone Advisory Councils (ZACs). The six ZACs

participate in the Planning and Implementation Committee and Evaluation Committee to help incorporate the needs of these small areas into the overall needs and priorities of the entire Empowerment Zone. Many of the implementers identified in the Empowerment Zone Strategic Plan, including the City of Knoxville, the University of Tennessee, and Pellissippi State Technical Community College, are involved in economic development and other issues at a regional level. The Metropolitan Planning Commission, which continues to be closely involved in the planning for the Empowerment Zone, also staffs the Metropolitan Planning Organization for this region. Many participants in the Empowerment Zone process are also involved in a regional visioning and planning process called Nine Counties, One Vision.

V. FUNDS EXPECTED TO BE AVAILABLE

The funds expected to be available to implement this Consolidated Plan include Community Development Block Grant, HOME, and Emergency Shelter Grant funds from the U.S. Department of Housing and Urban Development. Whatever federal funding is appropriated for the Round II Empowerment Zones will be used to implement the EZ Strategic Plan. A HUD EDI-Special Projects grant has been approved to implement part of the Workforce Competitiveness section of the EZ Strategic Plan. Funds from the Fair Housing Assistance Program will be available to carry out the City's Fair Housing Program. The City will continue to work with the Knoxville Coalition for the Homeless to seek funds under the HUD Notice of Funds Availability (NOFA) for the Continuum of Care. At the state level, the City will use its funding from the Tennessee Housing Development Agency (including the remaining portion of the state Bicentennial Neighborhood Initiative Grant) to carry out parts of the housing strategy. The City will apply for funding from other federal or state grants as it deems appropriate to supplement these resources. A more detailed listing of potential resources is included in the Annual Action Plan.

VI. GEOGRAPHIC DISTRIBUTION

In fall 1998, the City of Knoxville (in partnership with Knox County, the State of Tennessee, and the Partnership for Neighborhood Improvement) submitted an application for federal Empowerment Zone designation; the designation was awarded December, 1998. In an effort to be as inclusive as possible, Knoxville selected the largest area possible to nominate under the EZ program rules; substantial public input in 1994 led to the selection of the area to be nominated for EZ status. A 16-square mile area containing 48,192 residents in 19 census tracts of the central city plus three developable sites adjacent to the Zone has received a Round II Empowerment Zone designation. As part of its leverage commitment, the City of Knoxville has pledged the 90% of its CDBG and HOME funds for the duration of the EZ designation to affordable housing, neighborhood improvement, and economic development initiatives within the Empowerment Zone.

Within the Empowerment Zone, the EZ Strategic Plan called for a focus on comprehensive neighborhood revitalization efforts, beginning with the Bicentennial Neighborhood Initiative in Vestal and the College Homes/Passport Housing redevelopment in Mechanicsville. Accordingly, we will continue to make housing and other revitalization efforts in these two neighborhoods the top priority for investment of CDBG and HOME funds.

The remainder of Knoxville's Empowerment Zone will receive the next level of priority for housing and other activities. Downtown will also receive priority for public improvements to continue the City's implementation of the Downtown Knoxville Plan. Finally, housing programs will be made available on a citywide basis if funds remain.

VII. MONITORING

The Housing Programs Manager, Assistant Community Development Administrator, and Community Development Administrator oversee the planning and budgeting process to ensure that

projects are developed consistent with grant requirements. This planning process also ensures that each funded project is consistent with the Consolidated Plan and makes progress toward identified community development objectives. These staff members review expenditures and periodically request drawdowns against grants. These periodic reviews ensure that projects are being completed timely and that the expenditure deadlines for various grants are being met.

For housing activities, all applications for assistance are analyzed by Finance Specialists for compliance with program guidelines. Rehabilitation Specialists provide detailed specifications for ensuring that the activity meets Neighborhood Housing Standards and cost estimates to ensure that construction bids are reasonable and allowable. Each case is reviewed and approved by the Housing Programs Manager or Assistant Community Development Administrator to ensure accuracy and compliance with financial standards. During the construction process, all activities are monitored by Rehabilitation Specialists for compliance with the terms of the construction contract and Neighborhood Housing Standards. Project Specialists conduct any required environmental reviews or Davis-Bacon labor monitoring.

For subrecipient contracts, the contract monitor drafts a scope of service consistent with regulations and with the Consolidated Plan; this is reviewed by either the Project Manager, the Assistant Community Development Administrator, or the Community Development Administrator to ensure compliance with applicable plans and regulations. The City Law Department prepares a contract consistent with applicable laws and regulations. Each contract, which is typically on a reimbursement base, is assigned to a contract monitor who reviews expenditures for eligibility and reasonableness and approves invoices for reimbursement. Payments are also reviewed and approved by the Assistant Community Development Administrator or Community Development Administrator. The contract monitor also oversees implementation of the funded project or program, to ensure that the work

is carried out in accordance with the contract. Each subrecipient is typically monitored at least annually (except in the case of low risk subgrantees or projects) for compliance with administrative, financial, and internal controls guidelines. Subrecipients with significant findings on such a monitoring will typically be monitored on a more frequent basis in the future. All subrecipients must provide periodic reports which describe the activities carried out and identifying the beneficiaries of the project. These reports help to ensure that minority outreach is occurring.

For projects carried out the by City directly, each project is assigned to a staff person who monitors the progress of the project and approves invoices for payment. Payments are also reviewed and approved by the Assistant Community Development Administrator or Community Development Administrator. If applicable, a Project Specialist carries out environmental reviews or Davis-Bacon monitoring.

The Human Relations Manager oversees the citizen participation process and strives to find ways to broaden public participation in the process. All project management staff participate in annual planning to develop updates to the Consolidated Plan. A variety of City staff participate in planning processes conducted by agencies with whom we work closely.

Within the State of Tennessee, Knoxville is the only municipality with an ordinance that has been found “substantially equivalent” to the Fair Housing Act. With this comes the responsibility and opportunity to investigate and conciliate dual-filed housing discrimination complaints through the Fair Housing Assistance Program. This program will continue to assist citizens in attaining their rights to fair and equal housing.

In the area of minority business outreach, the City of Knoxville in 1999 adopted an Equal Business Opportunity Program. The program is designed to nurture and expand small businesses inclusive of minority- and women-owned businesses. The intent

was to develop practical policies that will foster business relationships between established businesses and minority, women, and small business owners. The program applies to all City agencies.

Continuum of Care

Program Narrative

1. Abstract

Note: The Continuum of Care is a document produced annually through a grant application process. Updated Continuum of Care information will be available each year during the term of this Consolidated Plan, and can be obtained from the City of Knoxville's Community Development office.

The Knoxville Coalition for the Homeless develops the Continuum of Care in Knoxville and Knox County. The Coalition is an organization established by Knoxville and Knox County as a forum for the collaboration of efforts in pursuit of the elimination of homelessness in the greater Knoxville area. The Coalition is made up of representatives from homeless service providers, government and nonprofit agencies, educational institutions, the homeless and others, and has set up a task force to examine the needs of and services for the homeless, from prevention and outreach through emergency shelter and transitional housing to reestablishment in permanent housing. Through discussions and surveys, the Coalition has developed an analysis of gaps in services and prioritized the relative needs for filling those gaps. Under this 2000 Continuum of Care application, programs serving area homeless will seek renewals in funding, along with funding for new programs designed to fill the current gaps. Programs seeking funding include street outreach; supportive outreach and case management; permanent supportive housing for mentally ill women and their children, and permanent supportive housing for the medically and mentally challenged, chronic substance abusers, former offenders, and people living with AIDS.

2. Planning process for developing 2000 Continuum of Care strategy

a. Identify the lead entity for the CoC planning process.

The lead entity for the Continuum of Care planning process is the Continuum of Care Task Force of the Knoxville Coalition for the Homeless. Representatives from several homeless service agencies and from both City and County government serve on the Task Force.

b. Describe your community's CoC planning structure.

The Knoxville Coalition for the Homeless forms the basis for the planning structure of the Continuum of Care for Knoxville and Knox County, Tennessee. The Coalition was formed in 1985 to pursue three main objectives: (1) to ascertain the extent of homelessness in Knoxville, (2) to determine services available to the homeless and make recommendations where services were deficient or nonexistent, and (3) to increase communication and coordination of services among agencies and organizations working with the homeless. This central focus of the Knoxville/Knox County Coalition for the Homeless provides a sound, logical basis upon which to build the

Continuum of Care strategy.

The Coalition meets monthly, throughout the year. While the various service providers work with one another daily, the Coalition provides a broader forum for discussion of issues facing the homeless. Discussions range from new services available to changes in the way TennCare is administered, to the effect of downtown redevelopment on the homeless, to information about available grants. These open discussions lead directly to the coordination of responses to issues and problems as they come up.

In January 2000, the Coalition held a daylong retreat for service providers in order to assess the general accomplishments and further needs for homeless services in Knox County. This was a non-scientific process to re-focus the efforts of the Coalition and develop a broad set of goals for the year. Knoxville's HUD Community Builders Sandie Shaver and Keith Richardson facilitated this well-attended retreat. Discussions were conducted both with the entire group and in smaller break-out sessions. Through this process, the Coalition assessed the *status quo* and developed a long list of goals for improving services for Knoxville's homeless population. After discussion of these goals, the entire group narrowed the list to five goals for the year 2000. These goals for serving Knoxville's homeless population are: to develop a strategy for housing people with criminal records; to develop a strategic plan for addressing mental health issues; to improve transportation services; to find ways to expand and/or improve day shelter services; and to develop a focused public relations, public education and outreach plan for the Coalition.

The Coalition has established five *ad hoc* committees to address each goal. Some of these broad goals will be addressed more specifically through this application process, while different resources will be sought to achieve the other goals.

The Coalition also has a standing Continuum of Care Task Force which guides the Continuum of Care planning process specific to this application. The CoC Task Force coordinates the gathering of data, guides the annual re-prioritization of current and proposed programs, and coordinates the writing and submission of the annual HUD Continuum of Care application. While activities of this Task Force certainly intensify during the months leading up to this submission, the Continuum of Care Task Force meets on a year-round basis to assure preparedness for the application process, and to assess the progress of previous Continuum of Care grants. The City of Knoxville Department of Development provides staff assistance for the task force in the writing of the Continuum of Care portion of the grant and in the packaging of the consolidated application.

Starting in October 1999, the Continuum of Care Task Force met with Dr. Roger Nooe of the University of Tennessee College of Social Work to coordinate CoC's data collection with Dr. Nooe's bi-annual survey of the homeless in Knoxville.

In February of this year, members of the Coalition, under the direction of Dr. Nooe, conducted surveys of Knoxville’s homeless population. This effort is undertaken every other year in order to help the Coalition stay focused on the needs of the homeless and how to most effectively provide services. This extensive study will be released in its complete form later this year. Selected data, however, has been culled from the survey to provide the most complete and up-to-date information available for the 2000 Continuum of Care.

Additionally, a survey of service providers was created to identify the capacity of currently available services to assist the current homeless population. With data gathered from both surveys, the Continuum of Care Task Force compiled the numbers to create the gaps analysis and establish the relative needs to fill each gap.

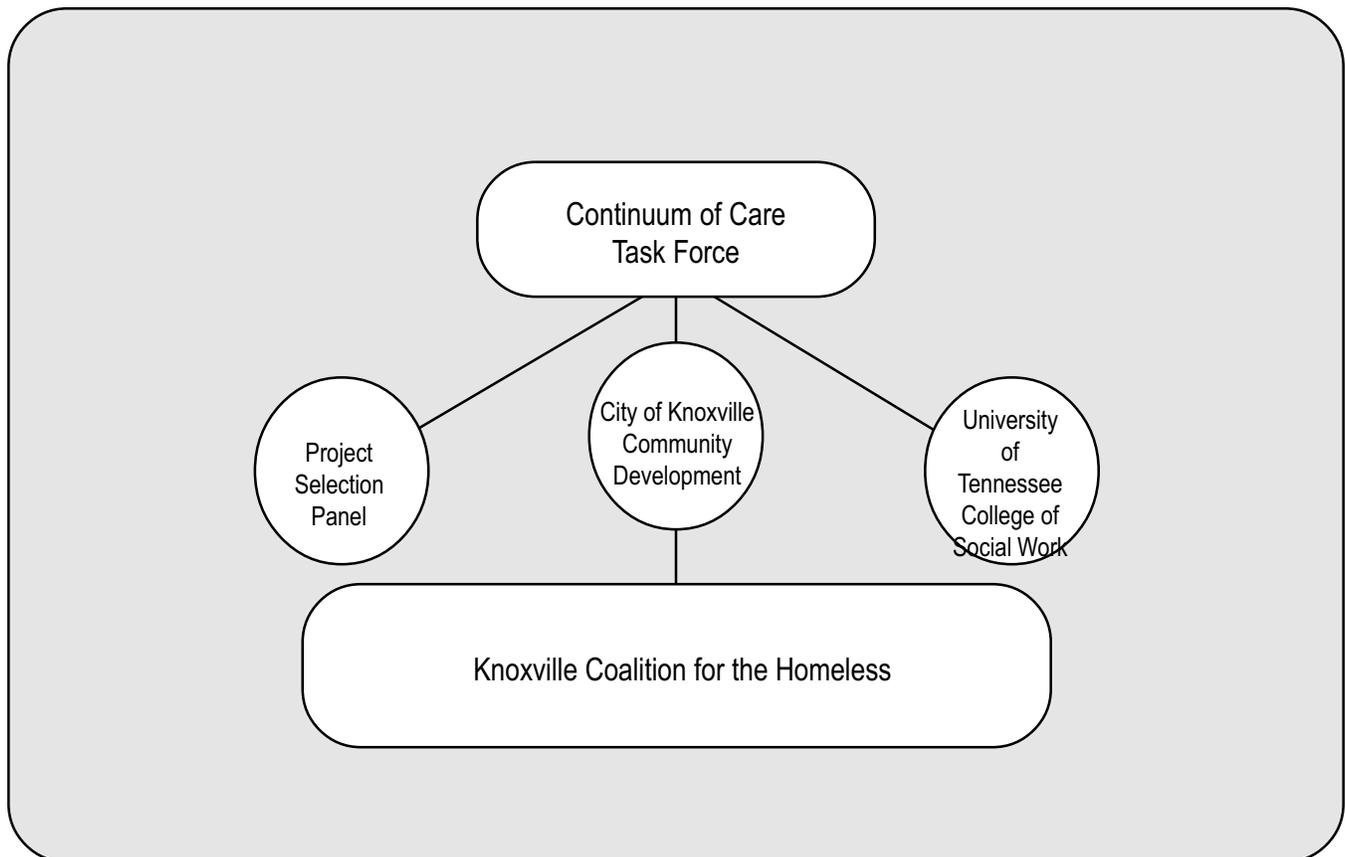
Concurrent to this process, the CoC Task Force met with local service providers who declared their preliminary intent to seek grants for renewals or new programs under this Continuum of Care. The Task Force advised potential applicants on eligibility

requirements and explained the Continuum of Care application process and how to access application materials.

On April 25th, the Coalition for the Homeless met with a panel of impartial community leaders to hear brief summaries of proposals from each applicant. After the proposals were presented, materials were submitted to the panel for review. In a roundtable process facilitated by the City of Knoxville Community Development Administrator Jeanette Kelleher , the panel reviewed and discussed each proposal. Using the relative priorities previously established by the CoC Task Force through the gaps analysis process, the panel prioritized the proposals, taking into consideration the needs for renewals and the special status established by HUD for a new, permanent housing program.

With these priorities established, the Continuum of Care narrative was finalized and the individual applications completed.

c. Provide a diagram of how the entities in your CoC organizational planning structure relate to each other.



d. List the dates and main topics of your CoC planning meetings held since June, 1999 and planned for in the future.

| Date | Topic | Date | Topic |
|-------------------|---|--------------------|---|
| June 22, 1999 | Review and accolades for 1999 Continuum of Care | July 27, 1999 | General Coalition Meeting |
| August 24, 1999 | Service Provider and Homeless Service Directory updates | September 28, 1999 | Discussion in anticipation of 2000 NOFA |
| October 26, 1999 | Discussion of coordination with UT survey of the homeless | November 1, 1999 | Met with Dr. Nooe to coordinate homeless survey |
| December 1, 1999 | Discussion in anticipation of 2000 NOFA, and planning for surveys. | January 18, 2000 | Discussed grants from 1999 CoC |
| January 20, 2000 | Coalition retreat; goal setting | January 25, 2000 | Retreat follow-up with full Coalition, installment of new officers, appointment of new CoC Task Force Chair, sign-up for other task forces. |
| January 28, 2000 | Planning strategy for CoC application | February 4, 2000 | Service Directory for the Homeless, update on NOFA |
| February 17, 2000 | Training meeting to prepare for Survey of the Homeless. | March 3, 2000 | Discussion of schedule for completing CoC application |
| March 10, 2000 | Developed list of panel members to rank CoC applications | March 17, 2000 | Potential CoC applicants discussed proposals under consideration. |
| March 24, 2000 | Discussed surveys and other preparation for CoC application | March 31, 2000 | Scheduling of Gaps Analysis process and presentation of proposals for ranking |
| April 7, 2000 | Work session to complete goals chart in application | April 17, 2000 | work session to develop gaps analysis |
| April 25, 2000 | Meet with ranking panel to prioritize CoC applications, meeting to accept public comment on draft as part of the City's Consolidated Plan | April 28, 2000 | reviewed 1st draft of 2000 COC application |
| May 5, 2000 | Work session, CoC application | May 12, 2000 | Work session, CoC application |

Note: The Continuum of Care task Force is a standing committee of the Knoxville Coalition for the Homeless. Except when weekly meetings are scheduled in preparation for this grant, the Task Force meets the third Tuesday of each month, following the regular Coalition meeting.

e. Levels of participation.

| Specific Names of CoC Organizations/Persons (Geographic area represented*) | Subpopulations represented (G, SMI, SA, HIV/AIDS, VETS, DV, Y) | Level of Participation in Planning Process |
|---|---|--|
| State Agencies | | |
| University of Tennessee - College of Nursing | G | Coalition Member |
| University of Tennessee - College of Social Work | G | Homeless survey, Project Priorities Panel Member, Planning Retreat, Coalition Member |
| TN Dept of Human Services | G | Project Priorities Panel Member |

e. Levels of Participation, *continued*

| Specific Names of CoC Organizations/Persons (Geographic area represented*) | Subpopulations represented (G, SMI, SA, HIV/AIDS, VETS, DV, Y) | Level of Participation in Planning Process |
|---|---|---|
| Local Governemnt Agencies | | |
| City of Knoxville (City only) | G | CoC Task Force, Main writer of Continuum of Care, Planning Retreat |
| HUD Community Builders | G | Facilitated Coalition Planning Retreat |
| Knox County | G | CoC Task Force, Coordinated ranking panel, Planning Retreat |
| Knox County Health Department | G | Coalition Member |
| Knox County Schools | Y | CoC Task Force, President; Knoxville Coalition for the Homeless, Planning Retreat |
| Knoxville's Commnuity Developoment Corporation (City only) | G | Project Priorities Panel Member |
| Knoxville Police Department | G | Coalition Member, Planning Retreat |
| Public Defenders Office | G | Coalition Member |
| Nonprofit Organizations | | |
| Associated Catholic Charities of East Tennessee | G | CoC Task Force, Planning Retreat |
| Knoxville Area Urban League | G | Coalition Member |
| Partnership for Neighborhood Improvement | G | EZ Coordinator, Project Priorities Panel Member |
| Banks | | |
| Sun Trust Bank | G | Project Priorities Panel Member |
| Neighborhood Groups | | |
| Council of Involved Neighborhoods | G | Project Priorities Panel Member |
| Housing developers | | |
| Knox Housing Partnership | G | Project Priorities Panel Member |
| Businesses | | |
| Covenant Health | G | Coalition Member |
| Knox Area Chamber Partnership | G | Project Priorities Panel Member, Planning Retreat, Coalition Member |
| Foundations | | |
| East Tennessee Foundation | G | Project Priorities Panel Member |
| Service Providers | | |
| Child and Family Services | SMI, SA, DV, Y | CoC Task Force, Planning Retreat |
| Disability Resource Center | G, SMI | Coalition Member |
| EM Jellinek Center | G | Coalition Member |
| Knox Area Rescue Ministries | SMI, SA, V, DV, Y | CoC Task Force, Planning Retreat |
| Knoxville/Knox County Community Action Committee | G | Chair, CoC Task Force, 1999 Coalition Pres., Planning Reatreat |
| Knoxville Legal Aid Society, Inc. | G | Coalition Member |
| Helen Ross McNabb Center | SMI, SA | CoC Task Force, Planning Retreat |
| Knox County Dismas House | G, SA | CoC Task Force |
| Kent C Withers Family Crisis Ctr | G, Y | Coalition Member |
| Lost Sheep Ministry | G | Coalition Member |
| Midway Rehabilitation Center | G, SA | Coalition Member |
| Positively Living | SMI, SA, HIV/AIDS | CoC Task Force, Planning Retreat |
| Salvation Army | SMI, SA, V, DV, Y | CoC Task Force, Planning Retreat |

| Specific Names of CoC Organizations/Persons (Geographic area represented*) | Subpopulations represented (G, SMI, SA, HIV/AIDS, VETS, DV, Y) | Level of Participation in Planning Process |
|---|--|---|
| Service Providers | | |
| U.S. Dept of Veterans Affairs | V | Project Priorities Panel Member, Coalition Member, Planning Retreat |
| Recovery Support Systems, Inc. | G, SA | Coalition Member |
| Rogers-Culliver Supportive Living | SMI | Coalition Member |
| Samaritan Place | G | Coalition Member |
| United Way of Greater Knoxville | G | Coalition Member |
| Volunteer Ministry Center | SMI, SA, DV, Y | Coalition Member |
| Volunteers of America | SMI, SA, DV, Y | CoC Task Force, Planning Retreat |
| YWCA | G, Y | Coalition Member |
| Homeless/former homeless persons | | |
| Homeless/Formerly Homeless Persons | G, DV, Y | CoC Task Force, Project Priorities Panel Member, Coalition Member |

* All represent both Knoxville and Knox County geographic areas, except where indicated.

3. Your community’s Continuum of Care system under development

a. Briefly describe your community’s vision for combating homelessness.

The spirit of cooperation established among Coalition members remains at an all time high, and services to the homeless have never been better coordinated. However, the needs of the homeless population and the environment in which we provide services is constantly changing. Mindful of this, the Coalition is committed to striving for constant improvement in service delivery and coordination.

The vision of the Knoxville Coalition for the Homeless is to “eliminate homelessness in Knox County through a comprehensive and integrated delivery system.” Total

eradication of homelessness is a tall order, but the practical steps toward this ultimate goal create the strategy for combating homelessness. Homelessness can be reduced, services and shelters be better, the length of time a person is homeless can be shortened, and all service providers can present a more united service delivery system.

In order to achieve this vision, the Knoxville Coalition for the Homeless works cooperatively with all service providers and with the homeless to lessen the impact of homelessness by assuring that services are delivered effectively, the rights of the homeless are respected, maximum effort is invested to assure effective, efficient, and economical deployment of resources. The specific goals and action steps needed for achieving our vision are summarized in Chart 3 (b).

b. Goals and Action Steps

| Goal | Action Steps | Responsible Person/Organization | Target Dates |
|--|--|--|--------------|
| Establishment of a centralized database for intake and referral. | The United Way and the Thompson Family Foundation is funding a local 211 telephone information and referral system which will be up and running this year. This is one of only a few 211 systems in the United States. | United Way, "Just Ask" 211 organization, Fort Sanders Foundation | May, 2000 |
| Increase outreach and assessment capacity. | Seek renewal of CAC's Project SUCCEED and REACH programs, which conducts in-depth assessment and program services. | Community Action Committee | May, 2000 |
| | Coalition Directory of Services for the Homeless will be updated and distributed this year, with a new introduction to help determine the best first course of action to provide immediate help and referrals. | Ad Hoc Directory Committee, Coalition P.R. committee | Summer, 2000 |

| Goal | Action Steps | Responsible Person/Organization | Target Dates |
|--|---|--|---------------|
| Increase outreach and assessment capacity. | Establish Coalition Public Relations committee to increase local public awareness of the homeless by establishing a year-round homelessness awareness events calendar. | Coalition Public Relations committee. | ongoing, 2000 |
| | The PR committee will also develop a Coalition newsletter designed to raise awareness within area churches and other organizations about the many different faces of homelessness. | Coalition Public Relations committee. | May, 2000 |
| | Establishment of a Mental Health Task Force by the Coalition to develop better communications with area mental health services in order to better serve the homeless population. | Coalition for the Homeless | ongoing |
| | Continue education and coordination with area emergency rooms and hospitals for referrals to these services. | The Mobile Crisis Center has been conducting outreach with various ERs, "Just Ask" 211 | ongoing |
| The development of specialized shelter services for specific groups of the homeless: the medically challenged and severely mentally ill. | Seek funding for Associated Catholic Charities expansion of Samaritan Place services, to provide medical services for elderly homeless. | Associated Catholic Charities | May, 2001 |
| | Seek funding for Helen Ross McNabb proposal to provide housing, mental health case management and vocational training for the seriously mentally ill who have a criminal record. | Helen Ross McNabb | May, 2001 |
| | Seek funding for acquisition, construction and services for a program to provide case management, mental health and substance abuse treatment, and other services for Dually Diagnosed homeless, chronic substance abusers and persons with HIV/AIDS. | Positively Living | May, 2000 |
| | Seek funding for Recovery Support Systems proposal is to provide for acquisition and new construction of a facility to serve chronically mentally ill, dually-diagnosed adult men. | Recovery Support Systems | May, 2001 |
| | Seek funding for Volunteers of America's Parents in Community program to serve families with one or more members who suffer mental illness. | Volunteers of America | May, 2001 |
| | Establishment of a Mental Health Task Force by the Coalition to develop better communications with area mental health services in order to better serve the homeless population. | Coalition for the Homeless | ongoing |
| | Develop additional capacity to provide 200 case management and mental health treatment slots. | 2001 - 2002 CoC Proposals | 2001 |

| Goal | Action Steps | Responsible Person/Organization | Target Dates |
|---|---|---------------------------------|--------------|
| The development of specialized shelter services for specific groups of the homeless: the medically challenged and severely mentally ill. | Use Central Intake and Referral System to determine needs and coordinate appropriate supportive services. | Just Ask 211 referral system | May 1, 2000 |
| | On-site professional medical assessment and evaluations for those with both physical and mental illness. | Volunteer Ministry Center | ongoing |
| Provide comprehensive mental health services at no cost, designated for the homeless. Comprehensive services would include intervention, therapy, medication and follow-up. | Seek funding for Helen Ross McNabb proposal to provide housing, mental health case management and vocational training for the seriously mentally ill who have a criminal record. | Helen Ross McNabb | May, 2001 |
| | Seek funding for acquisition, construction and services for a program to provide case management, mental health and substance abuse treatment, and other services for Dually Diagnosed homeless, chronic substance abusers and persons with HIV/AIDS. | Positively Living | May, 2000 |
| | Seek funding for Volunteers of America's Parents in Community program to serve families with one or more members who suffer mental illness. | Volunteers of America | May, 2001 |
| | Seek funding for Recovery Support Systems proposal is to provide for acquisition and new construction of a facility to serve chronically mentally ill, dually-diagnosed adult men. | Recovery Support Systems | May, 2001 |
| | Provide services on-site where the homeless are, including evening hours. | VMC, Area shelters | ongoing |
| Increase capacity to provide the supportive services needed to help individuals and families utilize the services available and move out of homelessness permanently. | Seek renewal of CAC's Project SUCCEED program, which conducts in-depth assessment and program services. | Community Action Committee | May, 2000 |
| | Increase the ability of case managers to provide follow-up and followthrough by adding 4-5 case management positions. | CAC | 2001 |
| | Continue VOA's permanent housing program for single, mentally ill women | Volunteers of America | ongoing |

| Goal | Action Steps | Responsible Person/Organization | Target Dates |
|---|--|--|--------------|
| Increase capacity to provide the supportive services needed to help individuals and families utilize the services available and move out of homelessness permanently. | Increase (provide a higher level of) direct assistance to help achieve permanent housing, such as for utility deposits, paying back bills, transportation, training, | CAC Homeward Bound, LIHEAP, Project Help, Positively Living | ongoing |
| | Provide preventive services including affordable legal resources, financial assistance, transportation, and day care services. | CAC, Legal Aid Society, Project Help, VMC, FEMA, Positively Living | ongoing |
| Improve method of delivery of services, so that the homeless get the services they need. | Seek renewal of CAC's Project SUCCEED program, which conducts in-depth assessment and program services. | Community Action Committee | May, 2000 |
| | Go to sites where homeless people are to provide services such as health care and mental health care. | Helen Ross McNabb, VMC, CAC REACH, Cherokee Health | ongoing |
| | VMC Health clinic has nurse practitioners, a dental clinic, and a new eye clinic. | VMC | ongoing |
| | Have easily available and affordable transportation so homeless persons can get to jobs, school, look for housing, etc. | CAC, KAT, City of Knoxville | ongoing |
| | New Coalition Transportation task force is addressing the need for increased hours and service areas to better provide services for the homeless. | Coalition for the Homeless | Winter, 2000 |
| Make sure that all services are easily accessible to homeless persons with disabilities. | Seek renewal of CAC's Project SUCCEED and REACH programs, which conducts in-depth assessment and program services. | Community Action Committee | May, 2000 |
| | The Directory of Services for the Homeless will be updated this year, and will indicate which facilities and services are accessible to the disabled. | Coalition for the Homeless | Summer, 2000 |
| | Offer Emergency Shelter Grant funds to help pay for the cost of making shelter services accessible. | City of Knoxville, State of Tennessee | ongoing |
| | Encourage providers at all component levels to make their facilities and services accessible and to call for interpreters when needed. The new 211 information line will have interpretation services available. | Coalition for the Homeless, Just Ask 211 referral line | ongoing |
| | Work with the Disability Resource Center to identify specific needs. | Coalition for the Homeless, Disability Resource Center | ongoing |
| Increase number of transitional housing units available. | Seek funding for Helen Ross McNabb proposal to provide housing, mental health case management and vocational training for the seriously mentally ill who have a criminal record. | Helen Ross McNabb | May, 2001 |

| Goal | Action Steps | Responsible Person/Organization | Target Dates |
|--|---|--|-----------------------|
| Increase number of transitional housing units available. | Seek funding for Volunteers of America's Parents in Community program to serve families with one or more members who suffer mental illness. | Volunteers of America | May, 2001 |
| | Continue Volunteers of America's and Salvation Army's Transitional Housing Programs | Salvation Army | ongoing; May |
| Move more individuals through transitional housing and into permanent housing to free up the transitional housing available. | Seek renewal of CAC's Project SUCCEED and REACH programs, which conducts in-depth assessment and program services. | Community Action Committee | May, 2000 |
| | Encourage modification operating procedures of some transitional housing programs, and better coordinate supportive services which will assist and educate individuals to prepare them for permanent housing. | Coalition for the Homeless | ongoing |
| | Continue VOA's permanent housing program for single, mentally ill women | Volunteers of America | ongoing |
| Address the barriers that criminal records or other disqualifying factors place on obtaining permanent housing, particularly for families with children. | Seek renewal of CAC's Project SUCCEED and REACH programs, which conducts in-depth assessment and program services. | Community Action Committee | May, 2000 |
| | Serve these families through Transitional Housing Programs while providing case management services to resolve the barriers. | Coalition for the Homeless Task Force on Homeless with Criminal Record, VOA Transitional Housing program | May, 2000; ongoing |
| | Seek funding for Helen Ross McNabb proposal to provide housing, mental health case management and vocational training for the seriously mentally ill who have a criminal record. | Helen Ross McNabb | May, 2001 |
| | Seek funding for acquisition, construction and services for a program to provide case management, mental health and substance abuse treatment, and other services for Dually Diagnosed homeless, chronic substance abusers and persons with HIV/AIDS. | Positively Living | May, 2000 |
| | Coordinate with area housing authority to develop housing options for this population. | Coalition for the Homeless, Knoxville's Community Development Corporation | May, 2000; ongoing |
| Address the difficulties of the mentally ill in finding and keeping permanent housing. | Seek renewal of CAC's Project SUCCEED and REACH programs, which conducts in-depth assessment and program services. | Community Action Committee | May, 2000 |
| | Seek Renewal funding to continue Child and Family Services' PleasanTree III. | Child and Family Services | May, 2000 |

| Goal | Action Steps | Responsible Person/Organization | Target Dates |
|---|---|--|---------------------|
| Address the difficulties of the mentally ill in finding and keeping permanent housing. | Seek funding for acquisition, construction and services for a program to provide case management, mental health and substance abuse treatment, and other services for Dually Diagnosed homeless, chronic substance abusers and persons with HIV/AIDS. | Positively Living | May, 2000 |
| | Seek funding for Helen Ross McNabb proposal to provide housing, mental health case management and vocational training for the seriously mentally ill who have a criminal record. | Helen Ross McNabb | May, 2001 |
| | Seek funding for Volunteers of America's Parents in Community program to serve families with one or more members who suffer mental illness. | Volunteers of America | May, 2001 |
| | expand the capacity to provide on-site case management and treatment for the mentally ill by approximately 250 slots. | Positively Living, Helen Ross McNabb, Volunteer Ministry Center, CAC | 2001, 2002, 2003 |
| | Develop more small-scale Permanent Supportive Housing for the mentally ill with on-site support services as well as scattered units with associated treatment and other supportive services. | Helen Ross McNabb, Child and Family Services | 2000, 2001 |
| Develop more permanent housing options for families and individuals of low income or that are on permanent fixed incomes (Social Security Disability, SSI, etc.) and need affordable housing. | Develop additional case management capacity to address this issue. | Positively Living, Volunteers of America, Community Action Committee | |
| | KCDC is applying for a set-aside of Vouchers under the Welfare-To-Work component | KCDC | 2000 |
| | Improve condition and affordability of the affordable rental housing stock through mainstream programs such as the City's Rental Rehab Program and CAC's Weatherization Program. | City of Knoxville, CAC | June, 2000; ongoing |

c. Fundamental Components in CoC System

Component: *Prevention*

Services in place: CAC's Family Assistance Program
CAC's Homeward Bound Program
Low Income Home Energy Assistance Program (LIHEAP) administered by CAC
Project Help administered by CAC
FEMA Emergency Assistance administered by CAC
Emergency Shelter Grant Program for homeless prevention by CAC
Forty-three churches that provide direct assistance up to \$50 per case
Volunteer Ministry Center's The Refuge Program
Salvation Army's Social Services Division
Ladies of Charity Energy Program
Falcons for Food

Services planned: Increased coordination between five agencies and 43 churches that provide financial assistance to prevent homelessness in cooperation with the new "Just Ask" 211 hotline.

How homeless persons access/receive assistance: CAC, the Refuge, Ladies of Charity and the Salvation army schedule by telephone contact all people in need of homeless prevention services. All agencies limit financial assistance to once per year per category. The local utility companies coordinate with all service providers to reduce the likelihood of duplicated services. Rent assistance and mortgage payments are not yet coordinated, but this is a goal for the service providers. Homeless people also access these financial assistance programs to reduce or eliminate arrearage that prevents them from obtaining housing.

Upon its introduction this year, anyone in Knoxville will be able to dial 211 on the telephone to receive information and referrals for various services, including stop-gap services that can prevent homelessness.

Component: *Outreach/Assessment*

Services in place: CAC REACH street outreach program
CAC's Counseling and recovery Services
Knox County Sheriff's Department
Knoxville Police Department
Helen Ross McNabb's Public Inebriate and Detoxification Program
Helen Ross McNabb's Centerpointe Program
Child and Family Services' Street Art program
Veterans administration outpatient clinic
Helen Ross McNabb AIDS outreach program
Volunteer Ministry Center day shelter
Child and Family Services programs
YWCA outreach
Knox County Schools programs for homeless children
Runaway Shelter
Lost Sheep Ministry
Salvation Army outreach
Knoxville Area Rescue Ministries outreach
Child and Family Service's Family Crisis Center
Overlook Health Center – case management/mental health care
Sexual Assault Crisis Center

Services planned: "Just Ask" 211 Information referral hotline
Knoxville Area Millennium Stand Down for homeless veterans

Outreach/Assessment, continued.

How homeless persons access/receive assistance: Street outreach programs such as CAC’s REACH program seek out the homeless on the street, in camps, and wherever they can be found. Outreach professionals offer assistance, initial counseling, and information about available services. Area shelters and organizations provide outreach for self-referred homeless as well as for individuals referred into the continuum by others including area hospitals, service providers and police. Domestic Violence programs such as those provided by Child and Family Services have telephone hotlines available and also take referrals from police.

The new 211 telephone information line will provide a 24-hour information service which will enable anyone in the Knoxville area to call and find out what services are available and how to access them.

The Knoxville Area Millennium Stand Down is an event to be held in October 2000 to provide basic medical screenings, legal services, and material supplies for the area’s homeless veterans. The event will be publicized and area shelters will provide information well ahead of time so that veterans will know how to access specially provided transportation to the event. Various homeless service providers will be available to take referrals from this event. Additionally, there will be representatives from service agencies available to help homeless individuals arriving at the event who cannot participate in it because they are not veterans.

Component: Emergency Shelter

Services in place: Knoxville Area Rescue Ministries
 Salvation Army
 Child and Family Services – Family Crisis Centers (East & West)
 Child and Family Services – Runaway Shelter
 Volunteers of America
 Volunteer Ministry Center Day Shelter

Services planned: Volunteer Ministry Center - facility move and expansion

How homeless persons access/receive assistance: Emergency Shelter facilities are centrally located, providing ample opportunity for self referral. In addition, other outreach programs refer individuals and even provide transportation to the shelters.

The Volunteer Ministry Center is currently seeking a new, centrally located facility that will provide more space to house expanding services, including medical, dental, and vision services. The location being sought will maintain ease of self-referral for the homeless.

Component: Transitional Housing

Services in place: 10 Half-way House programs for A&D
 7 half-way House programs for developmentally disabled
 Facilities for the mentally ill
 Positively Living housing for HIV/AIDS and other terminally ill homeless
 2 Half-way Houses for veterans
 U. S. Veterans Administration Homeless Vets Program
 Cavender House – Drug & alcohol recovery
 Midway rehabilitation Center
 E.M. Jellinek Center
 STEPS House
 Child and Family’s Great Starts
 CAC’s REACH program – case management
 Helen Ross McNabb’s Vocational Connections – case management
 Department of Rehabilitative Services – case management

Services planned: Coalition Task Force program for homeless with a criminal record

Transitional Housing, continued.

How homeless persons access/receive assistance: Individuals find their way into transitional housing programs primarily through the referral process. People who have already been in emergency shelters or begun other programs are placed into appropriate transitional housing, which is often in combined with programs geared to help correct the specific problems that precipitated the clients' homelessness in the first place.

Component: Permanent Housing

Services in place: Knoxville's Community Development Corporation - public housing
Knox County Housing Authority – public housing

Services Planned: Coalition Task Force program for homeless with a criminal record

How homeless persons access/receive assistance: Homeless persons in earlier components of the Continuum of Care are referred to permanent housing options through assessment and case management. In some cases, after receiving counseling and various forms of training, homeless persons are able to find the stability needed to successfully establish themselves in public or private permanent housing.

Component: Permanent Supportive Housing

Services in place: Positively Living – AIDS/HIV and hospice
Child and Family Services PleasanTree Apartments
Graham and Goodmen - Powell
Helen Ross McNabb Adult Services and Independent Living
Case Management services by CAC and VA Homeless Program
Child and Family Services Great Starts program

Services Planned: Positively Living – new facility

How homeless persons access/receive assistance: Homeless persons in earlier components of the Continuum of Care are referred to permanent housing options through assessment and case management. In some situations, case managers determine that support must be ongoing, and persons are referred to permanent supportive housing in order to meet the needs of persons such as the chronically mentally ill or those with disabilities.

d. Describe how your system facilitates movement of homeless persons from one component of the system to another, and how the components are linked.

The movement of homeless persons through the Continuum of Care system is an individualized process that varies depending on the needs and situation of the particular individual or family. This requires a flexible Continuum of Care system that recognizes the needs of the individual. A key ingredient in movement from one component to the next is the case manager, who works with homeless persons to assess needs, work out a plan, and access services. Another factor is the shelter where the homeless person is staying. Some shelter providers have a defined "program" that includes emergency shelter and transitional housing and many of the needed services in-house. This facilitates movement through continuum components for homeless persons who need the type of services and shelter offered by that provider.

In general, shelter as well as transitional and permanent supportive housing providers either have case managers on staff, or can access case management services for their clients

through the Community Action Committee, who work with clients to determine what services and resources are needed to help them reach a stable situation. Case managers make referrals, bring in outside resources, and help the clients access appropriate housing and supportive services, employment, physical and mental health care, transportation, and other services.

Some examples follow:

Volunteers of America – This program provides shelter and services for families and single women. The heart of what VOA does lies in the case management process. Case managers meet with clients soon after admission for shelter, try to determine the cause of homelessness and then develop a strategy with the client to make the necessary steps to achieve self-sufficiency. Clients also participate in group meetings for support groups and skills training. The emphasis is to prepare the clients for life in the community once they leave the shelter. VOA transitional housing programs offer case management for two years for clients who move out of the shelter, offering a greater chance for stability in permanent housing.

Knoxville Area Rescue Ministries (KARM) Union Rescue Mission - This program for men moves clients through a five phase process that targets areas of need and growth that are identified upon initial assessment. The length of stay depends on growth areas identified but could be anywhere from six months to several years. For those in the program, most needs are met within the KARM structure, including helping shelter residents situate themselves in permanent housing.

KARM New Life Inn shelter for women and families - In this program, client needs are addressed mainly by accessing services from outside agencies; such as the local housing authority, Knoxville-Knox County Community Action Committee, Knox County Schools, local mental health and substance abuse agencies. These needs are determined by an initial needs survey. Length of stay in the program depends on the needs and averages around four months.

Child and Family Service's Family Crisis Center for battered women and children - Child and Family offers many in-house services and is sometimes able to help its clients achieve a stable situation through its own transitional and supportive housing programs. However in most cases it is necessary to access services from other agencies such as the Department of Human Services, Knoxville-Knox County Community Action Committee, Food for Falcons, Sexual Assault Crisis Center, Knox County Schools, and Helen Ross McNabb Center for the vast amount of referrals to move their clientele to stable situations.

The Salvation Army Men's Shelter works with numerous community agencies to move both their transient and program population through the Continuum of Care components. Agencies assisting in this movement include the Knoxville-Knox County Community Action Committee, the Knox County Health Department, Helen Ross McNabb Center's mental health and substance abuse services, and Knoxville's Community Development Corporation (the local housing authority).

The Knoxville-Knox County Community Action Committee (CAC) Homeward Bound Program offers supportive services that help move homeless persons and families through all the Continuum of Care components. Case managers at CAC work with all the shelters, offering services both at CAC's main location and on-site at the shelters.

Linkages between Continuum of care components follow this individualized case management approach. As demonstrated in the examples above, service agencies work together to coordinate the specific components needed by each individual. The Knoxville Coalition for the homeless serves to strengthen these linkages by providing extra opportunities for contact among agencies, both formally through Coalition meetings, and informally through individual discussions before and after meetings.

e. Outreach by subpopulation

| Subpopulations | Outreach In Place | Outreach Planned |
|------------------------|---|--------------------------------------|
| Veterans | Street & Shelter Outreach - CAC | Operation Stand Down - October, 2000 |
| | VA Referrals to CFS and others | 211 Info Line |
| | Self-Referred | |
| Seriously Mentally Ill | Street & Shelter Outreach - CAC | 211 Info Line |
| | referrals to Helen Ross McNabb center | |
| | referrals from Schools | |
| | referrals from Police | |
| | referrals from Lost Sheep Ministries | |
| | referrals from families | |
| | referrals from churches | |
| | referrals from Knox Co. Health Department | |
| | referrals from Juvenile Court | |
| | referrals from Dept of Childrens' Services | |
| Self-Referred | | |
| Substance Abuse | Street & Shelter Outreach - CAC | 211 Info Line |
| | referrals from Schools | |
| | referrals from Police | |
| | referrals from Lost Sheep Ministries | |
| | referrals from families | |
| | referrals from churches | |
| | referrals from Knox Co. Health Department | |
| | referrals from Juvenile Court | |
| | referrals from Dept of Childrens' Services | |
| | referrals from halfway houses | |
| | Community Alternatives to Prison Program | |
| | Volunteer Ministry Center | |
| | Self-Referred | |
| HIV/AIDS | Street & Shelter Outreach - CAC | 211 info line |
| | referrals from Health Department | |
| | referrals from Hospitals | |
| | referrals from A&D programs | |
| | referrals from DRI-DOC | |
| | referrals from Centerpoint drug rehab program | |
| | HRM AIDS outreach program | |
| Self-Referred | | |
| Domestic Violence | Street & Shelter Outreach - CAC | 211 info line |
| | Family Crisis Center hotline | |
| | 4th Circuit Court oerders of protection | |
| | KPD | |
| | KCSD | |
| | YWCA outreach | |
| | CAC street outreach | |
| | DCS referrars to shelters | |
| | Knox County Schools | |
| | employers refer employees | |
| | Knox County Leagal Aid Society | |
| | Self-Referred | |
| Youth | Street & Shelter Outreach - CAC | 211 info line |
| | referrals from police | |
| | runaway shelter outreach | |
| | STREET ART program | |
| | Knox County Schools outreach | |
| | Other shelters not able to house children | |
| | Moses Center referrals to CAC | |
| | Head Start Program | |
| | Child and Family Services outreach | |
| Self-Referred | | |

4. a. Continuum of Care: Gaps Analysis

| | | Estimated Need | Current Inventory | Unmet Need/Gap | Relative Priority |
|--|------------------------------|----------------|-------------------|----------------|-------------------|
| Individuals | | | | | |
| Beds/Units | Emergency Shelter | 409 | 455 | -46 | L |
| | Transitional Housing | 347 | 393 | -46 | M |
| | Permanent Supportive Housing | 103 | 65 | 38 | H |
| | Total | 859 | 913 | -54 | |
| Supportive Service Slots | Job Training | 266 | 200 | 66 | M |
| | Case Management | 859 | 925 | -66 | H |
| | Substance Abuse Treatment | 215 | 148 | 67 | H |
| | Mental Health Care | 481 | 286 | 195 | H |
| | Housing Placement | 263 | 263 | 0 | L |
| | Life Skills Training | 859 | 158 | 701 | H |
| | Crisis Management | 123 | 113 | 10 | L |
| | Transportation | 685 | 144 | 541 | H |
| | Education | 411 | 40 | 371 | H |
| Subpopulations | Chronic Substance Abuse | 430 | 240 | 190 | H |
| | Seriously Mentally Ill | 481 | 51 | 430 | H |
| | Dually-Diagnosed | 144 | 35 | 109 | H |
| | Veterans | 172 | 40 | 132 | L |
| | Persons with HIV/AIDS | 20 | 11 | 9 | M |
| | Victims of Domestic Violence | 69 | 49 | 20 | M |
| | Youth | 33 | 24 | 9 | M |
| | Criminal Record | 77 | 12 | 65 | H |
| Elderly | 16 | 10 | 6 | M | |
| Persons in Families With Children | | | | | |
| Beds/Units | Emergency Shelter | 205 | 183 | 22 | L |
| | Transitional Housing | 122 | 138 | -16 | M |
| | Permanent Supportive Housing | 180 | 56 | 124 | H |
| | Total | 507 | 377 | 130 | |
| Supportive Service Slots | Job Training | 157 | 108 | 49 | M |
| | Case Management | 507 | 262 | 245 | H |
| | Child Care | 304 | 169 | 135 | H |
| | Substance Abuse Treatment | 127 | 85 | 42 | H |
| | Mental Health Care | 284 | 164 | 120 | H |
| | Housing Placement | 120 | 120 | 0 | L |
| | Life Skills Training | 507 | 112 | 395 | H |
| | Crisis Management | 72 | 7 | 65 | H |
| | Transportation | 406 | 17 | 389 | H |
| Education | 100 | 10 | 90 | H | |
| Subpopulations | Chronic Substance Abuse | 254 | 60 | 194 | H |
| | Seriously Mentally Ill | 284 | 48 | 236 | H |
| | Dually-Diagnosed | 85 | 0 | 85 | H |
| | Veterans | 5 | 0 | 5 | L |
| | Persons with HIV/AIDS | 8 | 8 | 0 | L |
| | Victims of Domestic Violence | 46 | 41 | 5 | L |

b. Data Sources and Methods

| Data Source | Method | Date of Data Collection | Street Count | Shelter Count |
|-----------------------------|---|-------------------------|--------------|---------------|
| Pre-survey shelter count | Phone calls | February 24, 2000 | | X |
| Homeless Service Providers | Mail Survey conducted by the CoC Task Force | March 17, 2000 | | X |
| Survey of homeless | Individual interviews | February 24, 2000 | | X |
| Survey of homeless | Individual interviews | February 25, 2000 | X | |
| Inventory count of beds | Ongoing count | ongoing | | X |
| Survey of Service providers | Mail Survey conducted by City of Knoxville for consolidated plan. | November 26, 1999 | | X |

c. Describe in a narrative the community’s process and rationale for completing the relative priority column in the Gaps Analysis Chart.

Information contributed by service providers and by the homeless themselves was combined to complete the inventory and need categories on the chart. Inventory was calculated by totaling the number of beds/services available in each category. Need was estimated by adding the number of homeless people served that day (or on the current caseload of that day for supportive services) to the number who were not able to be served based on the number turned away and/or on waiting lists. Service providers were encouraged to list any other categories they felt the need to include.

Surveys of shelters and service providers, surveys of the homeless, and existing records of bed-counts throughout Knoxville’s Continuum of Care were combined to create the Gaps Analysis chart. Based on these counts, members of the Continuum of Care Task Force separately established a ranking of high, medium, or low for each item on the chart. On April 17, 2000 the Task Force met to determine the relative priorities based on the compiled data. The individual members’ rankings were compared, and each line on the chart was reviewed and discussed by subject experts to ensure that the data correctly reflects the actual levels on need in the community.

As a result, a few of the priority rankings were adjusted based on the Task Force’s specific knowledge of unmet needs. The surplus of transitional housing beds available was considered to be somewhat misleading, because many transitional housing slots are geared towards specific subpopulations. Beds available for domestic violence victims cannot necessarily be used for the mentally ill or for homeless with a criminal record. Based on this reasoning, the Task Force decided to rank Transitional Housing needs as *medium*, despite the net surplus of beds available across all subpopulations. Conversely, the high gap indicated for veterans does not necessarily indicate a high priority need, because veterans can and do avail themselves

of services not exclusively designated for veterans. Need for case management for individuals was also upgraded due to the fact that many individuals require case management services from more than one organization. Consequently the indicated surplus in case management slots does not mean there is little need, because each individual may use several of those slots.

The Gaps Analysis chart, complete with the Continuum of Care Task Force’s relative priority rankings was presented to the entire Coalition for the Homeless on April 18th, and the Coalition voted by acclamation to endorse the chart and rankings.

d. Project Priorities

| Applicant | Project Sponsor/Project Name | Numeric Priority | *Requested Project Amount | Program (Check only one) | | | | |
|--|--|------------------|---------------------------|--------------------------|-----------|---------|-----------|---------|
| | | | | SHP new | SHP renew | S+C new | S+C renew | SRO new |
| Knoxville/Knox County Community Action Committee | Community Action Committee/ Project Succeed | 1 | \$417,150 | | X | | | |
| Knoxville/Knox County Community Action Committee | Community Action Committee/ Project REACH | 2 | \$313,740 | | X | | | |
| Child and Family Services | Child and Family Services/ PleasanTree III (years 1 and 2) | 3 | \$349,125 | | X | | | |
| Child and Family Services | Child and Family Services/ PleasanTree III (year 3) | 4 | \$174,563 | | X | | | |
| Positively Living | Positively Living | 5 | \$243,075 | X | | | | |
| Total Requested Amount: | | | \$1,497,653 | | | | | |

* Please note: The total requested project amount must not exceed the amount entered in the project budget in Exhibits 2, 3, and 4.

e. Describe how each project will fill a gap in your community’s Continuum of Care System. If it is a renewal project, describe what gap will be created if the project is not renewed.

Community Action Committee Project SUCCEED. (Renewal) The Continuum of Care has identified the following gaps that Project SUCCEED currently fills: outreach for key identified groups such as veterans, domestic violence victims, substance abuse, and the educationally challenged/deprived, intensive long term case management, transportation assistance, housing placement, job and life skills training, job placement, and funds for emergency child care.

The community’s need for Project SUCCEED stems from the limited supportive services available to the homeless. SUCCEED provides long-term intensive case management both at a central site and at the shelters. Due to rising numbers of homeless, shelters face increasing pressure to find other sources of services. Project SUCCEED is able to provide

resources such as transportation assistance, emergency child care, GED, Parenting, budgeting classes, life skills classes, crisis mediation, resume writing and job search assistance. The homeless are also able to obtain from Project Succeed work clothing and tools, housing placement assistance, deposits for utilities and housing, help with back bills that are preventing clients from getting into housing and housekeeping packages. SUCCEED’s long term case management increases the odds that clients will remain in housing, maintain their jobs and establish greater stability in their lives.

Community Action Committee Project REACH. (Renewal) REACH is a street outreach program that provides a variety of basic services to the street homeless aimed at increasing their level of safety and security, placement into appropriate housing or shelter, and provision of life skills or educational training required to maximize their level of self sufficiency. The ultimate goal is to remove people from the streets and return them to a stabilized situation. The case management approach implemented by REACH staff provides the necessary assistance

to assure that many of the street homeless acquire appropriate housing, employment and daily living skills to function at his/her maximum level.

Clients to be served by REACH staff include those who reside in outside homeless camps, automobiles or other vehicles of transportation, and abandoned properties unfit for human habitation. Most clients are single adults with an 80/20 ratio of men/women, although a growing number of clients represent families including children.

Currently REACH provides 100 cases of outreach, enrollments and case management per year, 65 transportation assists per year, 65 survival assists per year, 65 cases of assistance finding employment per year. REACH also helps move 50 cases from the streets to a shelter or other facility, and places 26 cases in permanent housing per year.

If this project is not renewed, not only will these specific services go undone, but because REACH provides outreach services for numerous other organizations within the community, there would be a cascading negative effect on the entire community's continuum of care. Without this type of outreach and case management, other area shelters and service providers would have to attempt to fill the gap, and would subsequently be made less able to provide their own services at current levels.

Child and Family Services PleasanTree III (Renewal). PleasanTree III has achieved considerable success with homeless, mentally ill women. As the third consecutive site operated by Child & family for this population, it has increased housing for an additional 8 women and their children since its inception in 1997. Over the last three years, 28 women and their 23 children have resided in PleasanTree III, and have reduced their number of hospitalizations and remained stable for longer periods of time. Due to increased stability, approximately 40% of the residents who have children have

reunited with their children or obtained visitation rights. Some of the women attend GED courses, and one mother has even begun studies at Pellissippi State. With 24-hour staff supervision, it has been an extremely safe, supportive housing environment.

The mentally ill homeless subpopulation and the need for permanent supportive housing remain high priority needs in Knoxville's Continuum of Care, even with Pleasantree III in service. Should this program fail to be renewed, those significant gaps would be widened even more.

Positively Living. This program would fill gaps in the area of permanent supportive housing and would serve those with substance abuse problems, the seriously mentally ill, and the dually-diagnosed, all high-priority subpopulations.

Project sponsor Positively Living proposes to acquire, rehabilitate and operate a transitional/permanent housing facility for homeless adults and their children who are chronic substance abusers, dually diagnosed, mentally ill and persons with HIV/AIDS and other life threatening illnesses. In addition, on site supportive services, including extensive case management and sub-contract with local agencies to provide chemical abuse treatment and mental health care will be provided. On-site AA/NA support meetings, individual therapy, anger and emotions support groups and other services that contribute to total well being of body, mind and spirit will be offered.

f. Describe relationship between Project Priorities and relative priorities on the Gaps Analysis chart.

All of the above projects meet high priorities on the Gaps Analysis chart. The priority as indicated on the chart was one of the criteria considered by the panel in ranking projects.

| Project Priority Ranking Panel | |
|---------------------------------------|---|
| Panel Member | Organization |
| Harold Busch | U.S. Department of Veterans Affairs |
| Jim Cornett | Tennessee Department of Human Services |
| Scott Daniels | Resident, Salvation Army |
| Xandra Devereaux | Knox Housing Partnership |
| Andrew Foss | Sun Trust Bank |
| Jenny Kitts | East Tennessee Foundation |
| Serry Kelly Marshall | Partnership for Neighborhood Improvement/Empowerment Zone |
| Cassandra McGhee | Knox Area Chamber Partnership |
| Dr. Roger Nooe | University of Tennessee - College of Social Work |
| Billie Spicuzza | Knoxville's Community Development Corporation |
| Gwen Winfrey | Council of Involved neighborhoods |

g. Describe the project priority selection process and how it was fair and gave equal consideration to projects proposed by nonprofit organizations. If SHP or S+C projects are expiring but not included as renewals on the priority list, describe the reasons for the exclusion.

The Knoxville Coalition for the Homeless already brings together many service providers and other interested parties on an equal footing, so it is natural that this organization would coordinate the process for establishing the project priorities for this Continuum of Care application. In 1999, the Coalition approved a new process that was felt would provide objectivity on the part of those ranking the priority order of proposed projects. In that process, the Continuum of Care Task Force developed a ranking process based on the community’s needs show in the Gaps Analysis chart and other considerations. Applicants’ proposals were presented before the Coalition and a panel made up of impartial reviewers, and the panel would

then meet to rank the proposals. The Coalition agreed that this process was fair and endorsed its use again this year.

The Coalition approved a ranking panel similar to the one used in 1999, designed to bring in diverse community interests, knowledge of homeless issues, and links to other community initiatives such as the Empowerment Zone. Panel members were selected so as to ensure that none would have any specific vested interest in the proposals that they would be judging. Panel members are listed on the previous page.

On April 25, 2000, at the regular meeting of the Knoxville Coalition for the Homeless, applicants gave a brief presentation about their proposed projects. The members of the ranking panel were present. Following the presentations, Coalition members and panel members were provided the opportunity to ask applicants questions.

Immediately following the presentations, the panelists and panel facilitators met to conduct the ranking session. Panelists had been provided the following information in preparation for the ranking:

- 1) Application summaries prepared by the applicants. These summaries answered specific questions that related to the ranking criteria.
- 2) A summary chart prepared by City of Knoxville Community Development staff.
- 3) Ranking criteria and evaluation guidance - see next page.
- 4) The Gaps Analysis chart
- 5) The Goals and Strategies summary for the Continuum of Care.

The facilitators lead a discussion of each ranking criterion and the panelists independently rated each proposal. Ranking forms were turned in to the facilitators who totaled the points for each project, and determined the rank order for each panelist. The facilitators averaged the rankings for each project to establish the final ranking. The Coalition and the

| Criteria | Maximum Points | Evaluation Guidance |
|---|-----------------------|---|
| Is this a <u>new</u> permanent housing project? | 10 | 10 points for up to \$250,000 project. For > \$250,000, 250000/project amount*10 = points. |
| Does the project fall under one of the identified strategies and will it lead to meeting the goals? | 20 | A project that meets the goals would get at least 5 points. The project that will have the greatest impact (based on services provided, results expected for the money) on meeting the goals and strategies would get 20 points with project with less impact getting fewer points. |
| Does the project meet a High priority on the Gaps Analysis chart? | 10 | If all funded activities are a high priority, 10 points. Medium, 5 points. Low, 0 points. A mix of activities would be adjusted accordingly. |
| Is the project located within the boundaries of and/or will principally serve residents of the EZ and will priority placement be given to persons living in shelters or on the streets within the EZ? | 5 | Within the boundaries – 2 points. Principally serve residents of EZ – 2 points. Priority placement – 1 point |
| How much leverage is offered? | 10 | The project offering the most leverage would get 10 points, with other projects receiving points based on their relative amount of leverage; i.e. half the leverage = 5 points. |
| Does the organization have the capacity to carry out the project? – What has performance been under other HUD or similar grants? | 5 | Based on information provided in the summary and the presentation, with the applicant with greatest capacity getting 5 points and others rated accordingly. |
| If this is a renewal, what has performance been under the original grant? | 5 | Based on information provided in the summary and the presentation, up to 5 points for the most successful project. |
| What is organization’s level of coordination and partnership within the Continuum of Care system? | 10 | See chart describing level of involvement. |
| MAXIMUM TOTAL | 75 | |

Continuum of Care Task Force tried to set up as fair and unbiased process as possible. All potential applicants were notified early on of what the process would be and given the opportunity to participate. All were invited to serve on the Continuum of Care Task Force. Equal consideration was given to all proposals, and for impartiality, the members of the ranking committee were selected so that they did not represent any agency seeking funding from HUD under this Continuum.

service funding through the Mental Health and Substance Abuse Block Grant, Workforce Investment At, and Welfare-to-Work Grant Program.

All of these programs are entitlements available to anyone who meets eligibility requirements. Case managers refer homeless clients to appropriate programs and advocate for the clients to ensure that clients are able to meet eligibility requirements. The Substance Abuse Block Grant program funds substance abuse programs for the Community Action Committee and Helen Ross McNabb center. The Knoxville Coalition for the Homeless works closely to ensure outreach is conducted to assist homeless clients get into these programs.

5. (a) Project Leverage (see below)

b. Describe how your homeless programs are being coordinated with each of the following mainstream programs, as applicable: Medicaid, State Children’s Health Insurance program, TANF, Food Stamps, and

| Project Priority Number | Name of Project | Type of Contribution | Source or Provider | Value of Written Commitment |
|-------------------------|-------------------|--|--------------------------------|-----------------------------|
| 1 | Project Succeed | Utility Bill Assistance | Energy Assistance Program | \$75,000 |
| 1 | Project Succeed | Housekeeping Packages | individuals and Churches | \$20,000 |
| 1 | Project Succeed | Emergency rent Assistance | Knox County Government | \$20,000 |
| 1 | Project Succeed | Child Care | Child Care Broker | \$60,000 |
| 2 | REACH | Utility Bill Assistance | Energy Assistance Program | \$75,000 |
| 2 | REACH | Housekeeping Packages | individuals and Churches | \$20,000 |
| 2 | REACH | Emergency rent Assistance | Knox County Government | \$20,000 |
| 2 | REACH | Child Care | Child Care Broker | \$10,000 |
| 2 | REACH | Winter Clothing, gloves, socks | Big Lots | \$3,000 |
| 2 | REACH | Personal care items | Churches | \$1,500 |
| 3 and 4 | Pleasantree | On-site Dual diagnosis Services | Axiom Mental Health Center | \$3,500 |
| 3 and 4 | Pleasantree | Maintenance and direct assistance for clients | Knoxville Mennonite Church | \$3,000 |
| 3 and 4 | Pleasantree | Fund solicitation and direct assistance for clients | Carolyn Richardson | \$5,000 |
| 5 | Positively Living | Rent and utilities | State of Tennessee (HOPWA) | \$44,650 |
| 5 | Positively Living | Emergency relief | Knox County Government | \$2,000 |
| 5 | Positively Living | Personal care items | Area Churches | \$1,500 |
| 5 | Positively Living | Client services (transportation, food, case management, medication and supplies) | Robert Wood Johnson Foundation | \$10,000 |
| 5 | Positively Living | Client services | St. Mary's | \$700 |
| 5 | Positively Living | Apartment Renovations | Monday Foundation | \$10,000 |
| 5 | Positively Living | Client services | Roddy Foundation | \$2,500 |
| 5 | Positively Living | Client Services | Ryan White Title II | \$44,948 |
| 5 | Positively Living | Education and respite | Glaxo Wellcome | \$5,000 |
| 5 | Positively Living | Client Services | Community Donations | \$11,000 |
| | | | TOTAL | \$448,298 |

c. Other mainstream resources

| Mainstream resources | Use of Resource in CoC System | CoC Component(s) |
|----------------------|---|---|
| CDBG | As part of the Consolidated Planning process, the Department evaluates both homeless and non-homeless housing needs and determines how to use all available funding to best meet the needs. In addition to the Continuum of Care strategy for the homeless, the overall housing strategy in the City's Consolidated Plan includes housing efforts that will provide additional permanent housing opportunities for the homeless. The strategy provides for additional affordable rental units as well as opportunities for low income, first-time homebuyers. | Emergency Shelter, Transitional Housing, Permanent Supportive Housing, other supportive services. |
| HOME | Through the HOME Program Community Housing Development Organization (CHDO) set-aside, the City is providing funding to Child and Family Services for development and/or rehab of additional Pleasantree type housing units. | Permanent Supportive Housing |
| Section 8 | Knoxville's Community Development Corporation | Permanent and Permanent Supportive Housing. |
| Public Housing | Knoxville's Community Development Corporation | Permanent and Permanent Supportive Housing. |
| Other Federal | In the coming program year, the City's Emergency Shelter Grant Program will be used to keep existing shelters operational by providing support to the Volunteer Ministry Center Day Shelter and the Volunteers of America Women and Family Shelter. ESG funds will also fill needed gaps in essential services by assisting CAC's Homeward Bound Program, funding a part-time case manager for Volunteers of America, and fund an Adult Homeless Mental Health liaison at Helen Ross McNabb. | Emergency Shelter, supportive services. |
| | FEMA | Homelessness Prevention |
| State | State HOPWA funds | Transitional and Permanent supportive housing. |
| City/County | City and County administration of CDBG, HOME, ESG, and other funding sources. General fund support to homeless service providers. | Outreach, Emergency Shelter, Transitional Housing, Permanent Supportive Housing, other supportive services. |
| Private | Private funding is the mainstay of many major providers. | Outreach, Emergency Shelter, Transitional Housing, Permanent Supportive Housing, other supportive services. |
| | Area churches | Supportive services and supplies. |
| Foundations | United Way of Greater Knoxville - over \$1.4 million in resources supports 40 programs at 20 agencies that provide services filling gaps in the CoC system. | Outreach, Emergency Shelter, Transitional Housing, Permanent Supportive Housing, other supportive services. |
| | Affordable Housing Trust Fund | Permanent Housing, Homelessness Prevention |

6. Bonus for Empowerment Zones

a. Number and location of projects in EZ

All Four proposals under this continuum of care are located within Knoxville's Empowerment Zone.

b. Which projects give priority EZ placement

While none of the proposed projects will use 'last known address in the EZ' as a criteria to favor one client over another, the fact remains that all of the large shelters and the majority of the service programs are located within the Empowerment Zone.

c. How will priority placement be ensured?

Due to the fact that most of the shelter spaces are located within the Empowerment Zone, the programs and services in this application are expected to primarily serve homeless persons living on the street or in shelters within the Empowerment Zone.

d. Narrative: Describe Continuum of Care – Empowerment Zone linkages

The Continuum of Care system is strongly linked to the Empowerment Zone planning process. Knoxville's approved Empowerment Zone plan specifically includes as a strategy the provision of supportive housing and services for homeless persons to meet gaps identified in the Continuum of Care. The housing work group that developed the EZ housing strategies was chaired by the then Vice-President of the Knoxville Coalition for the Homeless. Other members of the Coalition also served on various EZ planning and work groups. The lead implementing entity for the empowerment Zone Plan, the Partnership for Neighborhood improvement, assisted with the Continuum of Care process by participating in the project priority process.

III. ADDITIONAL HOMELESS NEEDS INFORMATION NOT REQUIRED FOR CONTINUUM OF CARE

Nature and extent of homelessness – For the 2000 Continuum of Care, the surveys of service providers and of the homeless were conducted to identify the nature and extent of homelessness in Knoxville. The total count of homeless in Knoxville is estimated at between 1,300 and 1,400 individuals. Also, according to the 1998 survey of the homeless conducted by the University of Tennessee College of Social Work, 71% of Knox County's homeless were identified as white, 29% were black, and 1% other. (Rounding error when compiling the survey causes this total to equal 101%). The Continuum of Care Gaps Analysis chart shows a breakdown of the homeless population into several other categories. The chart estimates the supply of services and facilities broken down by supportive service requirements and subpopulations, and compares that

with the estimated needs of homeless individuals by the same breakdown. A similar chart shows the same information with regards to homeless persons in families with children.

Continuum of care concept – The continuum of care concept is a way to consider the needs of the homeless, from outreach for those on the streets to the supply of temporary shelter, to re-establishment in permanent housing and promoting residential stability and greater self-determination. The Gaps Analysis chart therefore examines the needs of the homeless for Emergency Shelter, Transitional Housing, and Permanent Supportive Housing. In this way, the Continuum of Care attempts to provide a holistic picture of the nature and extent of homelessness in Knoxville, and through the setting of goals and coordination of services, strives to meet the complex needs of the homeless.

Specific objectives – The City of Knoxville's specific objectives for the use of its Emergency Shelter Grant funds are shown in Table 1C.

Table 1C
Summary of Specific Homeless/Special Populations Objectives
(Table 1A/B Continuation Sheet)

Applicant's Name Knoxville, TN

Priority Need Category
Homeless

Specific Objective
Number S-1

Over the next five years, the City will use its Emergency Shelter Grant funds to assist in the operations, maintenance, and rehabilitation of shelters for the homeless. We anticipate assisting two or more shelters per year in this way.

Specific Objective
Number S-2

Over the next five years, the City will use its Emergency Shelter Grant funds to assist in providing essential services for homeless persons. We anticipate assisting two or more service providers per year in this way.

Specific Objective
Number S-3

The City will continue to coordinate the Continuum of Care application process to help implement the goals and objectives identified in the Continuum of Care.

Specific Objective
Number

Specific Objective
Number

Specific Objective
Number

Specific Objective
Number

HOUSING STRATEGY

I. HOUSING MARKET ANALYSIS

Housing Supply – At the time of the 1990 Census, there were a total of 76,453 housing units in the City of Knoxville. The following table shows City of Knoxville housing broken down by owner occupied and rental property and bedroom size based on 1990 Census information.

According to the Metropolitan Planning Commission’s 1998 Development Activity Report, there was a net increase of 6,264 housing units from 1990 to 1998 for a total City of Knoxville housing stock of 82,717. The following chart shows the changes in housing stock by sector based on the number of residential building and demolition permits.

These figures show an 8.2% growth in housing units in the City of Knoxville from 1990 - 1998. Information from the Bureau of the Census shows that population in the City grew by 1.9% during this same time period. According to MPC’s Multifamily Housing Trends in Knox County, residential growth in both the City and County has primarily resulted from new single-family development.

However, multifamily development has always been a significant part of the city’s housing stock, representing 40% of all housing units in June 1998. Public housing units represent 11% of the multi-

family housing stock within the City (3,603 of 32,765). The Central and West sectors have the greatest percentage of multifamily housing, comprising 54% of all residential units in the Central Sector and 47% in the West. The City of Knoxville has 3.7 times as many multifamily units as the balance of Knox County. (*Multifamily Housing Trends in Knox County*, Knoxville/Knox County Metropolitan Planning Commission, August 1998).

The following table shows single-family residential development in the City from 1995 – 1998 (extracted from MPC’s development activity reports).

City of Knoxville Housing Supply

| | Total | 0 and 1 bedroom | 2 bedroom | 3 or more bedrooms |
|---------------------------------|-------------------------|-----------------|-----------|--------------------|
| Total Year-Round Housing | 76,453 | 16,612 | 28,696 | 31,145 |
| Total Occupied Units | 69,973 | 14,840 | 25,785 | 29,348 |
| Renter | 35,167 | 14,152 | 14,621 | 6,394 |
| Owner | 34,806 | 688 | 11,164 | 22,954 |
| Total Vacant Units | 6,480 | 1,772 | 2,911 | 1,797 |
| For Rent | 3,205 (8.35% vacant) | 1,143 | 1,523 | 539 |
| For Sale | 908 (2.54% vacant) | 100 | 355 | 453 |
| Other | 2,397 | 529 | 1,033 | 805 |

Source: 1990 U.S. Census

Changes in Housing Stock by Sector

| Sector | 1990 Census Count | 1990 – 1998 Building Permits | 1990 – 1998 Demolitions | Adjusted Housing Count | % Change |
|-----------------------------|-------------------|------------------------------|-------------------------|------------------------|----------|
| Knoxville | | | | | |
| Central | 22,666 | 652 | 618 | 22,700 | 0.15% |
| East | 12,112 | 552 | 76 | 12588 | 3.9% |
| North | 10,206 | 1,727 | 78 | 11,855 | 16.2% |
| Northwest | 14,028 | 2,043 | 26 | 16,045 | 14.4% |
| South | 8,430 | 733 | 51 | 9,112 | 8.1% |
| West | 8,985 | 1,450 | 44 | 10,391 | 15.6% |
| Total City | 76,453 | 7,157 | 893 | 82,717 | 8.2% |
| Total Knox County Balance | 67,129 | 22,353 | 104 | 89,378 | 33.1% |
| Total Knoxville/Knox County | 143,582 | 29,510 | 997 | 172,095 | 19.9% |
| Knoxville EZ | 23,270 | 1,187 | 648 | 23,809 | 2.3% |

Source: Metropolitan Planning Commission

Housing Demand and Affordability - Rentals: Over 5,000 multi-family housing units have been added to the Knoxville/Knox County market since 1990. As part of their latest Quarterly Market Survey, the Apartment Association of Greater Knoxville (AAGK) calculated the absorption rate from 1998 –

1999 by applying their occupancy figures to MPC's data for number of multi-family units with the following result:

Number of units vacant at the end of 1998: 5057
 Number of multi-family building permits issued in 1999: +493
Number of units vacant at the end of 1999: -3411
 Equals absorption in units: 2139

than income. Rents have increased at an average rate of 4.2% per year (21.2% total from 1994 - 1999). As a comparison, Median Family Income as computed by HUD increased from \$35,300 to \$45,500 (28.9 %) from 1994 – 1999 (5.78% per year over 5 years). However, rents increased at a higher rate than did prices in general. The average Consumer Price Index increased only 12.4% from 1994 to 1994, averaging 2.48% per year.

The Apartment Association survey covering the period October 1, 1999 - December, 1999 showed an overall occupancy of 92% as reported by apartment owners, property managers, and resident managers. The following table shows average rents and occupancy by area.

The following tables show rents and vacancy rates for different size apartments (# of bedrooms) and compare this to information in the 1995 Consolidated Plan. Apartments in outlying areas are not included.

Overall, rents increased by 21.55% from 1990 – 1994 (5.39% per year over 4 years). Over the next 5 year period since the last Consolidated Plan, rents increased at a slower rate and also at a slower rate

Sales:

Tennessee Housing Development Agency has compiled sales data from actual and up-to-date

Number of building permits for single-family residential, including Condos and Mobile Homes

| AREA | 1995 | 1996 | 1997 | 1998 |
|----------------------------|-------|-------|-------|-------|
| Knoxville Central Sector | 49 | 72 | 57 | 73 |
| Knoxville East Sector | 117 | 108 | 89 | 55 |
| Knoxville North Sector | 237 | 135 | 140 | 108 |
| Knoxville Northwest Sector | 220 | 212 | 107 | 150 |
| Knoxville South Sector | 15 | 44 | 16 | 25 |
| Knoxville West Sector | 66 | 102 | 137 | 68 |
| Knoxville Total | 704 | 673 | 546 | 479 |
| Knox County Balance | 2,274 | 2,386 | 2,032 | 2,166 |

Source: Metropolitan Planning Commission, Development Activity Reports

Average Rent and Occupancy by Area, 4th Quarter, 1999

| AREA | U.T. | North | Northwest | South | East | West | Outlying |
|----------------------|-------|-------|-----------|-------|-------|-------|----------|
| OCCUPANCY | | | | | | | |
| | 92.5% | 92.2% | 94.7% | 84.6% | 86.5% | 93.2% | 74.5% |
| AVERAGE RENTS | | | | | | | |
| Efficiency | \$333 | \$345 | \$368 | \$290 | | \$424 | \$325 |
| 1 BR | \$412 | \$381 | \$437 | \$332 | \$450 | \$471 | \$301 |
| 2 BR | \$566 | \$457 | \$540 | \$481 | \$510 | \$580 | \$472 |
| 3 BR | | \$623 | \$730 | \$390 | \$675 | \$738 | \$541 |

Source: AAGK Quarterly Market Survey, Summary of Data, Fourth Quarter, 1999

information pertaining to residential, single-family home sales for selected counties, including Knox. The following table shows the volume and median prices for sales in Knox County for 1994 - 1997.

Information was also compiled by a local Realtor from the Multiple Listing Service (MLS) Comp Books. This information shows the volume and average sales price of homes sold in Knox County by bedroom size from 1994 - 1998.

Vacancies

| | Efficiencies | | 1 BR | | 2 BR | | 3 BR | | 4 BR | |
|------------------|--------------|----------|------|----------|------|----------|------|----------|------|----------|
| | # | % vacant | # | % vacant | # | % vacant | # | % vacant | # | % vacant |
| Conventional | 761 | 7.9% | 5828 | 6.3% | 8270 | 7.6% | 1451 | 10.6% | 250 | 20.8% |
| Subsidized Rents | 775 | .39% | 2075 | 2.4% | 1171 | 5.6% | 585 | 8.4% | 190 | 5.3% |
| Total | 1536 | 4.1% | 7903 | 5.3% | 9441 | 7.4% | 2036 | 10% | 440 | 14.1% |

Source: Calculated from information reported in AAGK Quarterly Market Survey October 1, 1999 – December 31, 1999 (#s exclude those not reporting # vacant)

Change in Rents 1990 - 1999

| Bedrooms | Average Rent 1990 | Average Rent 1994 | Average Rent 1999 | % change 1990 – 1994 | % change 1994 – 1999 |
|------------|-------------------|-------------------|-------------------|----------------------|----------------------|
| Efficiency | 245 | 308 | 355 | 25.7% | 15.3% |
| 1 | 303 | 367 | 420 | 21.1% | 14.4% |
| 2 | 370 | 452 | 533 | 22.2% | 17.9% |
| 3 | 470 | 557 | 719 | 18.5% | 29.1% |
| 4 | 559 | 648 | 1095* | 15.9% | 69.0% |

*Note – this high rent average results from newer apartments built for students which rent by the bedroom.
 Source: Comparison with 1995 Consolidated Plan

Comparison of Market Rents and Affordable Rents (excludes subsidized developments)

| Number of Bedrooms | AAGK average rent + utility all. | Income Needed to Afford | 50% Rent Limit | 65% Rent Limit | Fair Market Rent | Number non-subsidized units in survey | #/% affordable to 50% MFI | #/% affordable to 65% MFI | #/% within FMR |
|--------------------|----------------------------------|-------------------------|----------------|----------------|------------------|---------------------------------------|---------------------------|---------------------------|----------------|
| Efficiency | 392 | \$15,680 | 392 | 491 | 303 | 776 | 351 (45%) | 620 (79.9%) | 15 (1.9%) |
| 1 | 473 | \$18,920 | 420 | 527 | 373 | 6272 | 1270 (20.2%) | 4394 (70%) | 320 (5.1%) |
| 2 | 601 | \$24,040 | 505 | 634 | 468 | 8725 | 768 (8.8%) | 5332 (61.1%) | 405 (4.6%) |
| 3 | 802 | \$32,080 | 583 | 724 | 624 | 1491 | 72 (4.8%) | 220 (14.8%) | 80 (5.4%) |
| 4 | 1200 | \$48,000 | 651 | 788 | 750 | 296 | 0 (0%) | 0 (0%) | 0 (0%) |

| Number of Bedrooms | Vacancy for units affordable to 50% rent limit | vacancy for units within FMR | vacancy % for affordable to 65% rent limit | Vacancy % for units above 65% rent limit |
|--------------------|--|------------------------------|--|--|
| Efficiency | 8.3% | 6.7% | 7.6% | 9% |
| 1 | 6.1% | 6.3% | 5.9% | 7.3% |
| 2 | 5.3% | 4.6% | 9.0% | 5.2% |
| 3 | 0% | 0% | 7.3% | 11.1% |
| 4 | NA | NA | NA | 20.8% |

The MLS data shows an increase in sales each year over this time period, increasing a total of 34.3% from 1994 to 1998. Most of the sales are for three and four bedroom units.

The following MLS information was available for City of Knoxville sales for the time period January 1, 1999 through October 31, 1999:

For these 954 properties, the median price was \$84,900; the average price was \$111,549; the highest price was \$1,100,000 and the lowest price was \$1,800. The average market time was 75 days.

Condition – Building condition data was extracted from appraisal data collected by the Knox County Property Assessor’s Office. Information was extracted from the latest tax roll for Residential Property within the City of Knoxville as of

January 1, 1999. The assessor’s classification system includes 8 ratings from unsound to excellent. The assessor’s 8 classifications are grouped into the following categories for the purpose of estimating the number of substandard houses in the City:

Standard Housing:

- Excellent /Very Good /Good - *Shows signs of use/ well maintained/ new/ good as new*
- Average – *Moderate wear/ some deferred maintenance/ repairs and replacement of some items needed*

Volume and Median Home Sales Prices, Knox County

| | | 1994 | 1995 | 1996 | 1997 | % change in sales price 1994 - 1997 |
|----------------|-------------------------|---------|-----------------|-----------------|----------------|-------------------------------------|
| New Homes | Volume (% change) | 1670 | 1909 (14.9%) | 977 (-48.8%) | 1104 (13.0%) | |
| | Median Price (% change) | 110,608 | 105,900 (-4.3%) | 124,000 (17.1%) | 126,000 (1.6%) | 13.9% |
| Existing Homes | Volume (% change) | 4662 | 6504 (39.5%) | 3692 (-43.2%) | 3736 (1.2%) | |
| | Median Price (% change) | 71603 | 73220 (2.3%) | 87425 (19.4%) | 89900 (2.8%) | 25.6% |
| All Sales | Volume (% change) | 6332 | 8448 (33.4%) | 4669 (-44.7%) | 4840 (3.7%) | |
| | Median Price (% change) | 78,500 | 79,900 (1.8%) | 92,900 (16.3%) | 97,000 (4.4%) | 23.6% |

Source: THDA Sales Price Data

Total Sales Volume by # of Bedrooms in House

| Bedrooms | 1994 | 1995 | 1996 | 1997 | 1998 | Total | % of Total |
|-----------|------|------|------|------|------|--------|------------|
| 2 or less | 602 | 572 | 616 | 636 | 780 | 3206 | 10.4% |
| 3 | 3231 | 3398 | 3587 | 3679 | 4604 | 18,499 | 60.1% |
| 4 | 1517 | 1472 | 1584 | 1541 | 1804 | 7918 | 25.7% |
| 5 or more | 216 | 202 | 228 | 238 | 285 | 1169 | 3.8% |
| All | 5566 | 5644 | 6015 | 6094 | 7473 | 30,792 | 100% |

Source: Multiple Listing Service, Knox County

Average Sales Prices by # of Bedrooms in House

| Bedrooms | 1994 | 1995 (% change) | 1996 (% change) | 1997 (%change) | 1998 (% change) | % change 1994 - 1998 |
|-----------|-----------|------------------|------------------|------------------|-------------------|----------------------|
| 2 or less | \$52,165 | \$53,851 (3.2%) | \$57,678 (7.1%) | \$59,047 (2.4%) | \$62,652 (6.1%) | 20.1% |
| 3 | \$91,477 | \$95,449 (4.3%) | \$101,128 (5.9%) | \$104,034 (2.9%) | \$111,010 (6.7%) | 21.4% |
| 4 | \$153,950 | \$157,440 (2.3%) | \$163,116 (3.6%) | \$166,033 (1.8%) | \$173,597 (4.6%) | 12.8% |
| 5 or more | \$179,376 | \$195,834 (9.2%) | \$199,954 (2.1%) | \$213,596 (6.8%) | \$211,160 (-1.1%) | 17.7% |
| All | \$107,663 | \$110,994 (3.1%) | \$116,748 (5.2%) | \$119,296 (2.2%) | \$123,037 (3.1%) | 14.3% |

Source: MLS, Knox County

City of Knoxville Home Sales by Price

| Price Range | Number of Houses Sold |
|-----------------------|-----------------------|
| < \$40,000 | 67 |
| \$40,000 - \$49,999 | 64 |
| \$50,000 - \$69,999 | 164 |
| \$70,000 - \$79,999 | 120 |
| \$80,000 - \$89,999 | 129 |
| \$90,000 - \$119,999 | 168 |
| \$120,000 - \$159,999 | 100 |
| \$160,000 - \$199,999 | 56 |
| \$200,000 + | 86 |

Source: MLS, Knox County

the total for building permits pulled. In 1998, there were building permits for 3,297 new housing units (includes multi-family and single-family) in Knoxville/Knox County. This averages to \$72,747 per unit.

In 1999, the average construction cost for new small 2-3 bedroom homes constructed as replacement housing under the City’s Housing Rehabilitation Program was \$46,145. The average rehabilitation cost was \$27,054. Rehabilitation costs are expected to increase substantially when new lead-based paint requirements go into effect on September 15, 2000.

Substandard Housing:

- Fair - *Maintenance, rehabilitation, and replacement of many items needed*
- Poor/Very Poor - *Major repairs needed*
- Unsound - *Demolition of the structure is required*

Based on the above rating classification, over 30% of residential properties within the City of Knoxville fall into the substandard category. The following table shows how substandard conditions vary among the City Sectors.

Cost of Housing - According to MPC’s report, Development in Knoxville/Knox County 1998, the dollar value of residential new construction in 1998 was \$239,846,000 in 1998. This figure is based on

Areas of Low/Moderate Income and Racial/Ethnic Concentrations – HUD’s Community 2020 software provides projections for income and racial/ethnic percentages for the year 1997. These projections are the basis for this section. In 1997, the median family income (MFI) for the Metropolitan Statistical Area (MSA), as estimated by HUD, was \$40,600.

Lower income households are primarily concentrated in the central city area. Maps 1 and 2 show the city census tracts with the greatest low- to moderate-income concentration. Map 1 shows the low- to moderate-income census tracts, which are the tracts that have a median family income less than 80% of the MSA median income (that is, tracts with median income less than \$32,480). Map 2 shows the very-

low-income census tracts, which are tracts that have a median family income less than 50% of the MSA median (that is, less than \$20,300).

Housing Conditions by Sector

| City Sectors | Standard Housing | | | Substandard Housing | | | | % Substandard |
|--------------|------------------|---------|-------|---------------------|----------------|---------|-------|---------------|
| | Good-Excellent | Average | Total | Fair | Poor/Very Poor | Unsound | Total | |
| Central | 367 | 3523 | 3890 | 5039 | 1743 | 129 | 6911 | 63.98% |
| East | 2347 | 4411 | 6758 | 2623 | 749 | 87 | 3459 | 33.86% |
| North | 2230 | 3369 | 5599 | 1083 | 166 | 19 | 1268 | 18.47% |
| Northwest | 4623 | 5744 | 10367 | 891 | 187 | 12 | 1090 | 9.51% |
| South | 1647 | 2322 | 3969 | 1408 | 494 | 30 | 1932 | 32.74% |
| West | 3603 | 520 | 4123 | 277 | 73 | 4 | 354 | 7.91% |
| Total City | 14817 | 19889 | 34706 | 11321 | 3412 | 281 | 15014 | 30.20% |

Source: Property Tax Assessor

Census tracts in which more than 35% of the population belongs to a particular racial/ethnic minority group are considered areas of minority concentration. Map 3 shows these areas based on the 1997 Community 2020 projections. All but two of these tracts (tracts 21 and 32) also fall in either the low- to moderate-income or very-low-income categories.

Special needs facilities and services/Housing stock available to serve persons with disabilities/
Housing stock available to serve persons with HIV/AIDS and their families

Elderly/frail elderly - Tennessee Department of Health data indicated 16 nursing home facilities in Knox County, with 2,133 licensed beds. The occupancy rate for these facilities was 92.2%. Over the last few years, a large number of assisted living facilities have been established to aid the elderly and frail elderly in daily living. These facilities offer a variety of care levels and provide supportive services for residents and range in price from \$50 - \$120 per day. Due to the continued construction of these facilities, it is not possible to obtain an accurate figure of units available. Waiting lists exist, but fluctuate, depending upon the facility and service needed.

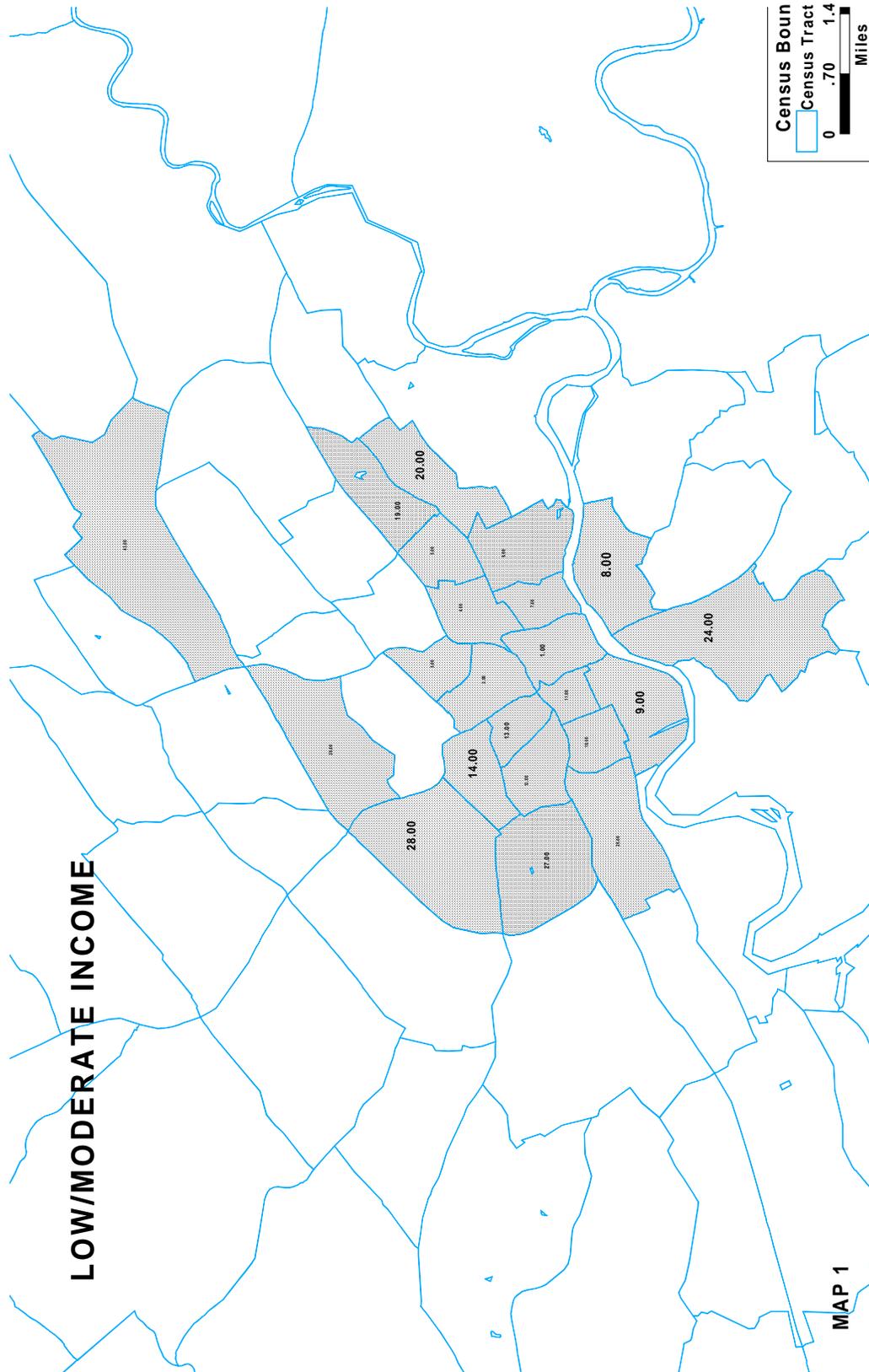
Within the city limits of Knoxville, there are 632 units designated for elderly families at various subsidized housing developments, including Love Towers, Dr. Lee Williams Complex, Cagle Terrace, and Northgate Terrace. These units range from efficiency to two-bedroom apartments and are most likely to be in a high-rise development. A waiting list exists for these. The Manor, located within the Northgate Terrace building, is an independent living center

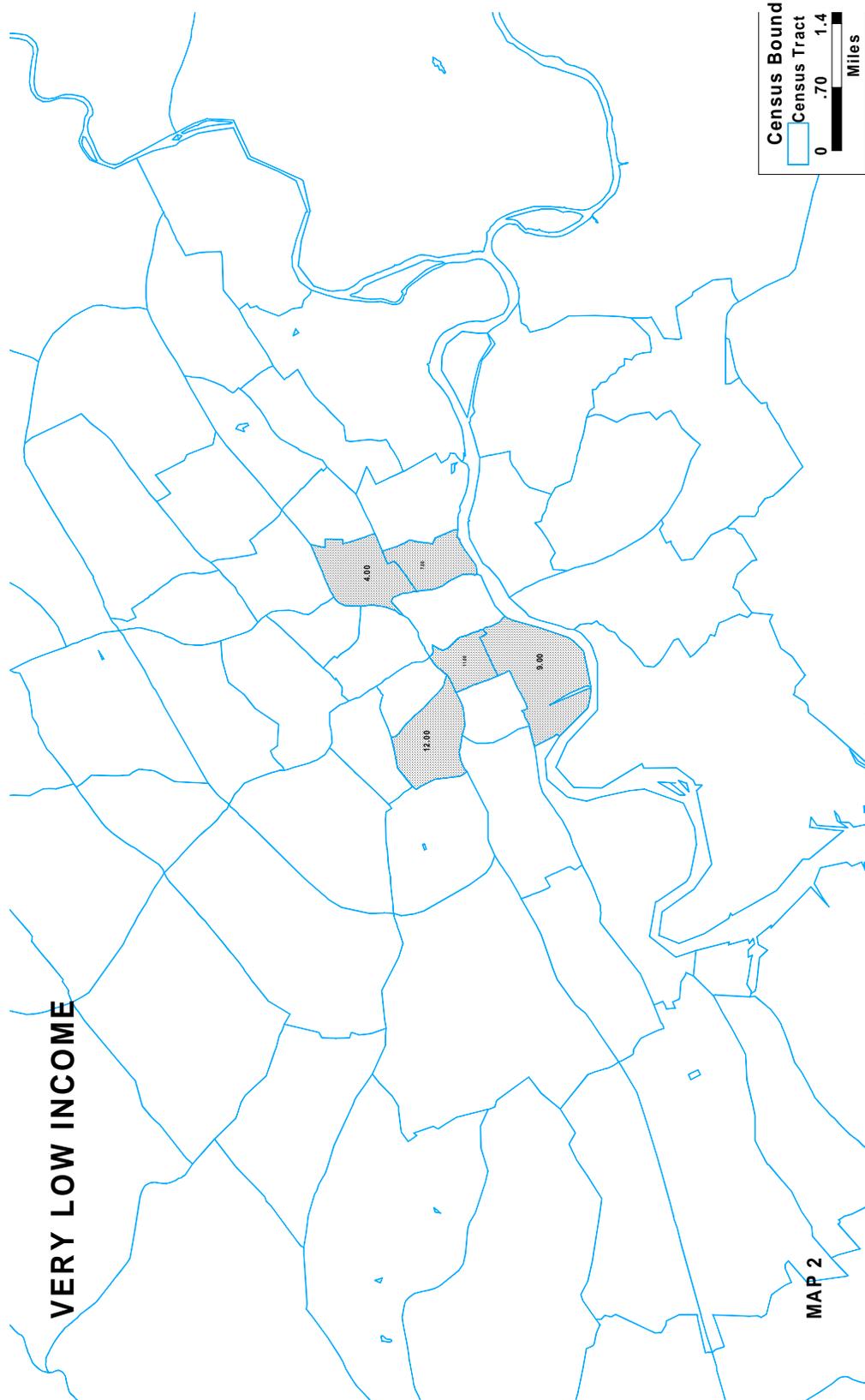
operated by KCDC. Individuals 60 years or older who are experiencing problems associated with the aging process can continue to live independently in a private apartment setting. Services are provided at a monthly flat rate and may include meals, cleaning, and laundry assistance. Additionally, The Lee Williams Center is a recreational community center in the public housing development. The Center serves disabled and elderly residents who live in the complex and neighborhood. Activities, special events, and a daily hot lunch are part of the program.

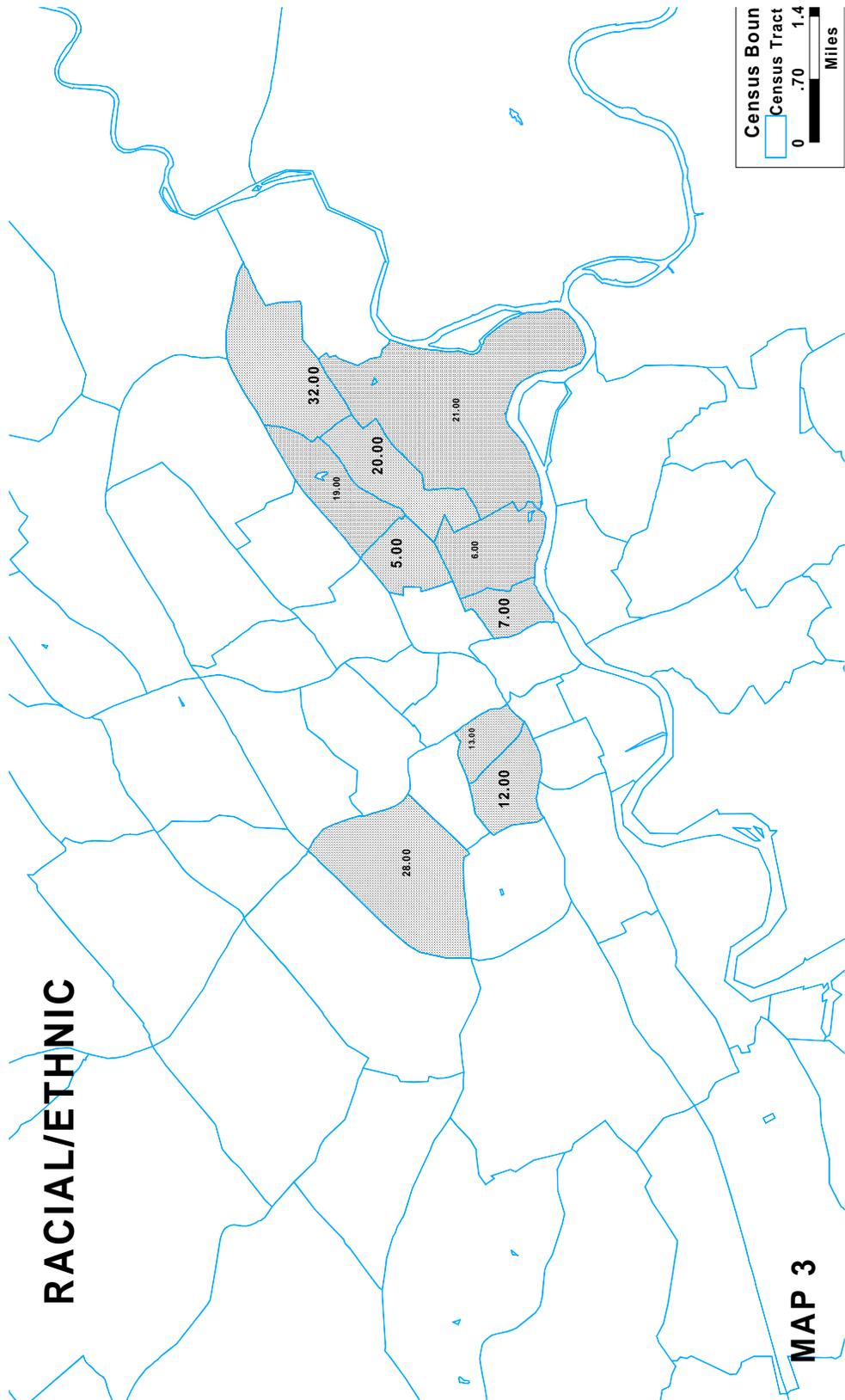
Additional existing housing services for the elderly/frail elderly include:

- Child and Family Services
- City of Knoxville – Owner Occupied Rehabilitation
- Emergency Shelters
- Faith-based organizations – a variety of these offer repairs and assistance
- Knoxville/Knox County Community Action Committee – Minor home repair, Weatherization program
- Non-profit and For Profit Housing Facilities – Shannondale (3 stages), Hillcrest, retirement facilities, independent apartments, residential homes for the aged, private landlords, family/multi generational housing
- St. Mary’s – assisted living, nursing home, Samaritan Place, residential hospice, case management
- Tennessee Department of Human Services – Foster homes for seniors

Additional existing non-housing services for the elderly/frail elderly include:







- Arnstein Jewish Community Center – Recreational, cultural and educational programs, transportation, information and referrals, phone contact
 - Helen Ross McNabb – geriatric partial hospitalization, case management, prescription medication services
 - Jewish Family Services – individual and family counseling, resource planning, support groups, case management, transportation, information and referrals, volunteer services, educational programs, emergency loan program
 - Knoxville Legal Aid Society
 - Knoxville/Knox County Community Action Committee – homelessness prevention (information and referrals, emergency loan funds), GED, job and employment skills, computer training
 - Office on Aging – Nutrition/home delivery, transportation, volunteer opportunities (some with subsidy), adult day care, Senior Companion Program, Senior Center (health checks, education, recreation), outreach, information and referrals, psycho/socio assessments
 - Senior Citizen Home Assistance Service – Homemakers services, live-in caregivers, Home hair care, Generation-to-Generation Volunteer Program, Minority Applicant Pool System (housing locator assistance), Project Renew (Assistance with reading, bill paying, etc.), transportation
 - Senior Citizen Information and Referral
 - St. Mary's – Help line for information and referrals, travel excursions, merchant discounts, assistance with insurance filing, flu and pneumonia shots, health screenings and education, fitness center, transportation, case management, adult daycare, emergency response, tele-care, volunteer services, mental health assessments and services, homes health and hospice, elder outreach and visitations, medical patient care
 - Tennessee Department of Human Services, Adult Protective Services
 - Veteran Affairs Outpatient Center
- Knoxville have been developed as housing for the disabled. Of the 747 units available, 665 are public housing available to the elderly and disabled. Additionally, there are group homes and properties with efficiency, one-, and two-bedroom apartments which are accessible and have some supportive services available.
- In addition to the above, the following housing and service opportunities have been identified by service providers for persons with physical disabilities:
- Area Banks – Grants for modification of existing housing and homeownership opportunities
 - Area Churches – Emergency assistance with food, utilities, clothing etc.
 - Beta Homes – Group homes
 - Cerebral Palsy Center – Group homes, family support services
 - City of Knoxville, Community Development Division – ADA improvements and modifications to housing for low income disabled
 - Disability Resource Center – Information and referral, grants for homeownership for disabled up to \$10,000
 - East TN Human Resource Agency
 - Habitat for Humanity – Homeownership opportunities
 - Knox Housing Partnership – Homeownership opportunities
 - Knoxville Area Community Center for the Deaf
 - Knoxville/Knox County Community Action Committee – Minor Home Repair, Weatherization, Energy Assistance
 - Private Boarding Homes
 - Project Help – KUB heating assistance
 - Sertoma Center – Group homes, supervised and semi-dependent supportive living services, employment workshop
 - Special Technology Access Center
 - Sunshine Industry – Employment workshop
- Developmentally disabled** – There are a variety of services and supportive housing alternatives available. These generally remain full and most often have waiting lists for services.

Physically Disabled – Several properties within

Existing services for the developmentally disabled include:

- Cerebral Palsy Center, Inc. – Agency case management, community participation, day services, nursing related services, personal assistance, residential services, overnight respite care, sheltered workshop, supported employment, supported living, transportation
- Community Network Services – Individual support, service coordination
- Evergreen Presbyterian Ministries, Inc. – Community participation, environmental accessibility/adaptation, personal assistance, overnight respite care, supported employment, supported living, transportation
- Goodwill Industries – Community participation, day services
- Helen Ross McNabb Center – Family based residential, personal assistance, overnight respite care
- IOI – Community participation, day services, family based residential, residential services, supported employment, supported living, residential behavior support, residential enhanced support, residential medical support, transportation
- Omni Visions, Inc. - Agency case management, community participation, crisis intervention services, day services, environmental accessibility/adaptation, family based residential, nursing related services, occupational therapy, personal assistance, physical therapy, overnight respite care, specialized equipment and supplies, speech, hearing, and language services, supported employment, supported living, residential behavior support, residential enhanced support, residential medical support, transportation
- Open Arms Care Corporation – Community participation, day services, sheltered workshop, supported employment, transportation
- ResCare, Tennessee - Agency case management, community participation, crisis intervention services, day services, environmental accessibility/adaptation, nursing related services, occupational therapy, personal assistance, physical therapy, sheltered workshop, specialized equipment and supplies, speech, hearing, and language services, supported employment, supported living, residential behavior support, residential enhanced support, residential medical support, transportation
- Sertoma Center – Agency case management, community participation, day services, environmental accessibility/adaptation, personal assistance, residential services, overnight respite care, sheltered workshop, specialized equipment and supplies, supported employment, supported living, residential behavior support, residential enhanced support, residential medical support, transportation
- Stepping Stones – Agency case management, environmental accessibility/adaptability, family based residential, nursing related services, personal assistance, specialized equipment and supplies, supported living
- Sunrise Community of Tennessee – Agency case management, community participation, crisis intervention services, day services, environmental accessibility/adaptation, nursing related services, occupational therapy, personal assistance, overnight respite care, sheltered workshop, specialized equipment and supplies, speech, hearing, and language services, Supported employment, Supported living, Residential behavior support, Residential enhanced support, Residential medical support, Transportation
- Sunshine Industries – Agency case management, community participation, day services, personal assistance, residential services, sheltered workshop, supported employment, supported living, transportation
- Tennessee Department of Health, Division of Mental Retardation Services – Funding for non-profits, information and referral, consultation for families and agencies
- Tennessee MENTOR – Agency case management, community participation, day services, environmental accessibility/adaptation, family based residential, nursing related services, occupational therapy, personal assistance, physical therapy, overnight respite care, sheltered workshop, specialized equipment and supplies, speech, hearing, and language services, supported

employment, supported living, residential behavior support, residential enhanced support, residential medical support, transportation

Helen Ross McNabb, Inc. has recently received funding and property commitments to build four, three-bedroom group homes for persons who are both developmentally disabled and mentally ill. Each structure will house three individuals and have 24-hour staff on site.

Severe Mental Illness and Alcohol/Drug

Addiction - Existing housing and services for those suffering from alcohol/drug addiction and severe mental illness include:

- Agape Houses – Halfway houses for men and women with drug/alcohol addictions
- Child and Family Services – Supportive housing
- Helen Ross McNabb Center – Alcohol and Drug Services – Centerpoint program, Adolescent Residential Unit, DRI Dock, case management, vocational services, psychiatric care, dual diagnosis, AIDS outreach
- Helen Ross McNabb Center – Mental Health Services – Supportive living facilities (group homes and apartments), Warner Center
- Knoxville/Knox County Community Action Committee – Long term case management, advocates, housing assistance (deposits), GED training, Career Closet, Counselors (alcohol and drug, domestic abuse, medications), stranded travelers assistance, transportation, life skills training, employment classes, parenting classes, resume services
- Lakeshore – Psychiatric hospital, Counseling and training for families and youth, psycho/social model program, accredited school, GED training, alcohol and drug treatment
- Mental Health Association – Support group clearinghouse, screening programs for mental illness, alcoholism, depression, anxiety and eating disorders, individual and family advocacy programs, public education programs, professional educational programs, suicide prevention training, information and referrals, corporate training, mental health system advocacy program
- Metropolitan Drug Commission – Knox County clearinghouse, videos and publications for checkout, hot line, Ident-A-Drug, assessment center, information and referrals, Knox County DUI School, MDC Alliance (monthly providers network), Drug Court, DUI Court, Tennessee Drug Free Work Place

HIV/AIDS – Currently, there are two supportive housing situations available. Graham Apartments house 8 persons with HIV/AIDS. Goodman-Powell Apartments assist seven persons with full-blown AIDS. In addition to these, Section 8 and Mod/Rehab housing is available for those that qualify. KCDC, in conjunction with Positively Living, a Knoxville non-profit that serves the HIV/AIDS population, is developing a request for Mainstream funds to assist those without housing.

In addition to the above supportive housing, service providers indicate the following as existing services for those with HIV/AIDS:

- AIDs Support Services in Tennessee – Funding for non-profits
- Child and Family – Case management, transportation, clothing and food
- Fort Sanders Hope Center
- Helen Ross McNabb – Focus on alcohol and drug addictions, prevention education in alcohol and drug facilities, detention facility, and schools in region, street team outreach, stationary outreach, risk assessment, counseling
- Knoxville Legal Aid Society
- Positively Living – Case management, emergency food, housing referral, advocacy, spiritual counseling, psychotherapy, education regarding medications, new treatment, and nutrition, transportation, medication and supplies subsidy, daily hot lunch, disability assistance, alcohol and drug treatment, dental care, eye care

Assisted Housing Inventory – Knoxville's Community Development Corporation (KCDC) is the local public housing authority for the City of Knoxville. As such, KCDC owns and maintains all

the public housing units in the jurisdiction. There are currently 3,603 public housing units in the City of Knoxville. This is a reduction of 369 units from the 1995 Consolidated Plan, primarily due to the demolition of College Homes for a HOPE VI Development. One hundred sixty-two (162) of the public housing units are handicapped accessible. In addition to public housing, KCDC administers rental assistance for 194 Section 8 Moderate Rehabilitation units, and 649 Certificates and 1250 Vouchers used to assist tenants with rent in existing private housing of their choosing. This is an increase of 464 Certificates and Vouchers over the number available at the time of the 1995 Consolidated Plan.

The assisted housing inventory includes public housing, privately owned subsidized housing, and rental assistance certificates and vouchers. In addition, there are many units of housing with restricted rents and occupancy limited to lower income tenants. These include housing developed through the Low Income Housing Tax Credit Program and housing units rehabilitated through the City of Knoxville HOME funded Rental Rehabilitation Program. Though these units have restricted rents which are affordable to tenants at 50, 60 or 65% of the Median Family Income, tenants with incomes below these levels generally still need assistance and often also utilize Rental Assistance Vouchers or Certificates to help pay their rent.

Knoxville's assisted housing inventory is summarized in the table below.

In addition to what is noted in the chart, there are 378 Low Income Housing Tax Credit units in process. These units are in developments that have approved tax credit applications but have not yet been completed and placed in service. Seventy-nine of these units will be in the Mechanicsville area as part of the HOPE VI redevelopment. KCDC will soon have applications in for additional rental assistance vouchers. They are applying for 230 "Fair Share" vouchers and 75 Mainstream vouchers. The Mainstream vouchers are for individuals/families with disabilities. The application process is competitive, so these additional units are not guaranteed.

The assisted housing inventory is primarily targeted to very low and extremely low income tenants. Most Low Income Housing Tax Credit developments and HOME funded units are targeted to tenants below 60% of the median family income, adjusted for family size.

A number of subsidized housing developments have reached the end of their Section 8 contracts or are due to do so soon. In these cases, HUD is extending the contracts for one year at a time. Some units in the past have opted out of the program, and the project based assistance was replaced with rental assistance vouchers. There are not any developments known to be planning to opt out at this time and it is expected that HUD will continue to extend Section 8 contracts.

Though KCDC is contemplating applying for another HOPE VI Revitalization grant, the decision is contingent upon support for a HOPE VI project by public housing residents and the communities surrounding public housing developments, and commitment of matching/leverage funds. A development has not been selected so it is not known at this time whether additional units will be lost from the public housing stock due to a HOPE VI development.

City of Knoxville Assisted Housing Inventory

| Rent Subsidized Developments | | | | | | |
|---|---|-----------------|-------------|-------------|-------------|------------|
| | Type of Housing | Number of Units | 0-1 BR | 2 BR | 3 BR | 4+ BR |
| Senior Housing (designated for elderly or persons with disabilities) | HUD (202, Sec 8 NC & LMSA) | 1389 | 1374 | 15 | | |
| | Public Housing | 628 | 607 | 21 | | |
| | Total | 2017 | 1981 | 36 | | |
| Housing for Persons with Disabilities | HUD (202, Sec 8 NC, 811) | 54 | 52 | 2 | | |
| | THDA/Sec 8 | 28 | 28 | | | |
| | Public Housing (E/H not designated for elderly) | 665 | 640 | 25 | | |
| | Total | 747 | 720 | 27 | | |
| Family / nondesignated | HUD (Sec 8 NC & SR, LMSA, Pres.) | 1366 | 275 | 723 | 360 | 8 |
| | THDA/Sec 8 NC | 199 | 38 | 113 | 40 | 8 |
| | Public Housing | 2310 | 476 | 781 | 657 | 396 |
| | Sec 8 Mod Rehab | 194 | 30 | 146 | 18 | |
| | Total | 4069 | 819 | 1763 | 1075 | 412 |
| Total Subsidized Developments | | 6833 | | | | |
| Rental Assistance | Section 8 Certificates & Rental Assistance Vouchers | 1899 | | | | |
| Rent/Occupancy Restricted Units | Low Income Housing Tax Credit | 361 | | | | |
| | City of Knoxville HOME Rental Rehab | 124 | 39 | 61 | 20 | 4 |
| | Total Assisted/Rent Restricted | 9217 | | | | |

Sources: KCDC, City of Knoxville, THDA

II. HOUSING NEEDS ASSESSMENT

Housing Needs - Table 2A provides an estimate of housing needs for the next five year period for households of various types and income levels. The households types include small related, large related and elderly renter households; other renter households including individuals with mental or physical disabilities including HIV/AIDS; owner households; and special populations. The special populations category overlaps the others. The renter category would include families on the public housing and Section 8 tenant-based waiting lists as well as public housing residents if they still have a housing problem. Information for this table was derived from the CHAS table (originally Table 1C

from the 1994 CHAS). Data for the CHAS table was provided by HUD and is based on 1990 Census Data. The number of households in need of housing assistance was arrived at for each category by multiplying the percentage of households with housing problems by the number of households. Line 18 and 19 of the CHAS table shows the number of households for each category and the percentage with housing problems for comparison purposes.

More up-to-date information, gathered through surveys of low income housing consumers, social service agencies and the Council of Involved Neighborhoods (COIN); KCDC waiting list information; and housing market analysis information, was also used to help identify housing needs. The Community Development Division conducted three surveys in order to obtain more up-

Table 2A

| PRIORITY HOUSING NEEDS (households) | | Priority Need Level High, Medium, Low | | Unmet Need | Goals |
|-------------------------------------|---------------|--|------|------------|-------|
| Renter | Small Related | 0-30% | H | 2231 | 42 |
| | | 31-50% | H | 1270 | 120 |
| | | 51-80% | M | 798 | 100 |
| | Large Related | 0-30% | H | 378 | 10 |
| | | 31-50% | H | 278 | 25 |
| | | 51-80% | M | 209 | 24 |
| | Elderly | 0-30% | H | 697 | 15 |
| | | 31-50% | H | 659 | 60 |
| | | 51-80% | M | 361 | 42 |
| | All Other | 0-30% | H | 3122 | 50 |
| | | 31-50% | H | 1691 | 152 |
| | | 51-80% | M | 1257 | 139 |
| Owner | 0-30% | H | 2129 | 390 | |
| | 31-50% | H | 1755 | 430 | |
| | 51-80% | H | 1430 | 130 | |
| Special Populations | 0-80% | M | * | 8 | |
| Total Goals | | | | | 1,737 |
| Total 215 Goals | | | | | 1,037 |

* Special populations are in large part included in the "All Other" Renters category.

to-date information on housing needs. One survey was sent to people known to be seeking housing assistance. This included a sample from KCDC's waiting lists and the City's waiting list for people wishing to apply for housing rehabilitation assistance. Thus both renters and homeowners were included in this survey. Another survey was sent to social service agencies in order to get their views on needs in the community. The third survey was distributed to

members of COIN at their regular meeting. The results of these surveys were presented at two public meetings. In addition, several forums were held in order to assess the needs of special populations. The following discussion covers specific housing problems and needs of households of various type and income levels.

Housing Condition - When asked about problems

| CHAS Table 1C - All Households | | | | | | | | | |
|--|--|------------------------------|------------------------------------|-------------------------------|------------------|-----------------------------|------------------------|-----------------|---------------------|
| Name of Jurisdiction: Knoxville City, TN | | | Source of Data CHAS Data Book | | | Data Current as of: 1990 | | | |
| | Renters | | | | | Owners | | | |
| Household by Type, Income, & Housing Problem | Elderly 1 & 2 member househo lds | Small Related (2 to 4) | Large Related (5 or more) | All Other House olds | Total Renters | Elderly | All Other Owners | Total Owners | Total Households |
| | (A) | (B) | (C) | (D) | (E) | (F) | (G) | (H) | (I) |
| 1. Very Low Income (0 to 50% MFI) | 3,754 | 5,189 | 810 | 6,016 | 15,769 | 4,460 | 2,444 | 6,904 | 22,673 |
| 2. 0 to 30% MFI | 2,322 | 3,234 | 491 | 4,003 | 10,050 | 1,895 | 1,021 | 2,916 | 12,966 |
| 3. % with any housing problems | 44% | 69% | 77% | 78% | 67% | 73% | 73% | 73% | 68% |
| 4. % Cost Burden > 30% | 43% | 67% | 63% | 78% | 66% | 73% | 72% | 73% | 67% |
| 5. % Cost Burden > 50% | 25% | 53% | 46% | 66% | 51% | 35% | 60% | 44% | 50% |
| 6. 31 to 50% MFI | 1,432 | 1,955 | 319 | 2,013 | 5,719 | 2,565 | 1,423 | 3,988 | 9,707 |
| 7. % with any housing problems | 46% | 65% | 87% | 84% | 68% | 34% | 64% | 44% | 58% |
| 8. % Cost Burden > 30% | 46% | 63% | 65% | 80% | 65% | 33% | 63% | 44% | 56% |
| 9. % Cost Burden > 50% | 17% | 17% | 16% | 30% | 22% | 10% | 29% | 17% | 20% |
| 10. Other Low-Income (51 to 80% MFI) | 860 | 2,573 | 374 | 2,993 | 6,800 | 2,541 | 2,959 | 5,500 | 12,300 |
| 11. % with any housing problems | 42% | 31% | 56% | 42% | 39% | 13% | 37% | 26% | 33% |
| 12. % Cost Burden > 30% | 42% | 28% | 26% | 41% | 35% | 12% | 34% | 24% | 30% |
| 13. % Cost Burden > 50% | 7% | 1% | 0% | 3% | 3% | 1% | 7% | 4% | 3% |
| 14. Moderate Income (81 to 95% MFI) | 236 | 1,009 | 86 | 1,183 | 2,514 | 1,027 | 1,929 | 2,956 | 5,470 |
| 15. % with any housing problems | 17% | 6% | 12% | 14% | 11% | 5% | 26% | 19% | 15% |
| 16. % Cost Burden > 30% | 17% | 4% | 0% | 12% | 9% | 5% | 24% | 17% | 13% |
| 17. % Cost Burden > 50% | 2% | 0% | 0% | 0% | 0% | 1% | 2% | 2% | 1% |
| 18. Total Households** | 5,640 | 12,658 | 1,597 | 14,320 | 34,215 | 13,113 | 22,645 | 35,758 | 69,973 |
| 19. % with any housing problems | 37% | 35% | 59% | 45% | 40% | 21% | 18% | 19% | 30% |

** Includes all income groups -- including those above 95% MFI

with their current housing, the problem cited most frequently (66%) by housing consumers was that their home needed repairs. In the agency survey, 67% of respondents felt assistance to make repairs to owner-occupied homes was a very high or high priority; and 73% felt rehab of affordable rental units was a very high or high priority. Fewer (47%) felt the need for emergency minor repairs was a very high or high priority. In the COIN survey, 71% of

respondents felt assistance to make repairs to owner-occupied homes was a very high or high priority; and 76% felt improving condition of rental property was a very high or high priority. Of this group, 90% felt that providing minor home repairs for senior citizens was a very high or high priority, but only 32% felt this was about this need for non-elderly homeowners.

The problem of substandard housing is substantiated by the housing conditions information in the Market Analysis Section. Over 30% of residential properties within the City of Knoxville fall into the substandard category. The problem of substandard housing is most pronounced in areas where there are the greatest percentage of lower income residents and the least ability to afford the repairs. The greatest need is in the Central Sector, where 54% of the households have incomes below \$20,000 (based on HUD's Community 2020 1997 estimates) and 63.8% of the structures are substandard. Substandard housing is a problem for both homeowners and renters. There are currently over 500 homeowners on the City's waiting list for the City's Housing Rehabilitation Program.

Cost Burden – The second most mentioned problem by housing consumers related to cost burden and probably also relates to the problem of substandard housing. Forty-five percent (45%) of respondents said that their utilities were too high. Twenty-four percent (24%) said that their mortgage or rent payments were too high. The cost of housing has prevented many of the respondents from bettering their housing situation. When asked “If you are unhappy with your current housing, why haven't you moved?” the most frequently cited reasons were “Can't afford monthly housing payment” (29%) and “No money for down payment or security deposit” (28%).

The respondents to the agency survey felt there was a need to address the cost burden encountered by lower income households. Over sixty-two percent (62.5%) rated assistance to purchase a home as a very high or high priority; while 72.7% rated rental assistance as a very high or high priority. Seventy-five percent (75%) of COIN respondents felt that helping people become homeowners was a very high or high priority.

The CHAS Table and CHAS Data Book provide data that shows the degree to which cost burden is a problem for households of different incomes and type. The chart on the following page rank-orders the household incomes/types in order to show where the problem is greatest.

The household type with the greatest problem with affordability appears to be the “All Other Households” category of renters, particularly those with incomes below 30% MFI. This group of renters is composed primarily of single non-elderly individuals, but also includes other unrelated groupings. More renter households fall into this category than the others and this is the category least served by existing rental assistance and subsidized housing programs (unless the renter has a disability). Very low income (0 – 50% MFI) small related renter households also have a serious problem with cost burden as do extremely low income (0 – 30% MFI) elderly homeowners.

Moderate income households of all types appear to have little problem with cost burden except for non-elderly homeowners where 34% have a cost burden greater than 30%. Fewer large related households have a cost burden problem than the other categories, partly because there are so few households in this category. However, high percentages (63 & 64%) of large related households with extremely low and very low incomes have a cost burden problem.

Referring back to the comparison on market rents and affordable rents in the Market Analysis section, one can see that there are very few non-subsidized units affordable to tenants with incomes less than 50% MFI. Households with less than 50% MFI are likely to have a cost burden problem unless they are receiving rental assistance, or for large families, are living in overcrowded conditions in order to afford the rent.

Availability of units – When consumers were asked about their reasons for not moving to better housing, only 10% responded that there was not housing available. 5% responded that there were no new houses and 4% said there was no accessible housing for persons with disabilities. 44.4% of agency respondents thought construction of affordable multi-family rental units was a very high or high priority; even more (59.3%) thought construction of affordable rental single-family or duplex housing was a very high or high priority. Agency respondents

Cost Burden

| Number of Households with Cost Burden > 30% | | % of household type/income with Cost Burden > 30% | |
|---|--------|---|---------------|
| Category | Number | Category | % of Category |
| Renter – All Other Households 0 to 30% MFI | 3,110 | Renter – All Other Households 31 to 50% MFI | 80% |
| Renter – Small Related 0 to 30% MFI | 2,176 | Renter – All Other Households 0 to 30% MFI | 78% |
| Renter – All Other Households 31 to 50% MFI | 1,619 | Owners – Elderly 0 to 30% MFI | 73% |
| Owners – Elderly 0 to 30% MFI | 1,386 | Owners – Other than elderly 0 to 30% MFI | 72% |
| Renter – Small Related 31 to 50% MFI | 1,230 | Renter – Small Related 0 to 30% MFI | 67% |
| Renter – All Other Households 51 to 80% MFI | 1,225 | Renter – Large Related 31 to 59% MFI | 64% |
| Owners – Other than elderly 51 to 80% MFI | 1019 | Renter – Large Related 0 to 30% MFI | 63% |
| Renter – Elderly Households 0 to 30% MFI | 995 | Renter – Small Related 31 to 50% MFI | 63% |
| Owners – Other than elderly 31 to 50% MFI | 893 | Owners – Other than elderly 31 to 50% MFI | 63% |
| Owners – Elderly 31 to 50% MFI | 843 | Renter – Elderly Households 31 to 50% MFI | 46% |
| Owners – Other than elderly 0 to 30% MFI | 739 | Renter – Elderly Households 31 to 50% MFI | 43% |
| Renter – Small Related 51 to 80% MFI | 710 | Renter – Elderly Households 51 to 80% MFI | 42% |
| Renter – Elderly Households 31 to 50% MFI | 653 | Renter – All Other Households 51 to 80% MFI | 41% |
| Owners – Other than elderly Moderate Income | 456 | Owners – Other than elderly 51 to 80% MFI | 34% |
| Renter – Elderly Households 51 to 80% MFI | 359 | Owners – Elderly 31 to 50% MFI | 33% |
| Renter – Large Related 0 to 30% MFI | 310 | Renter – Small Related 51 to 80% MFI | 28% |
| Owners – Elderly 51 to 80% MFI | 304 | Renter – Large Related 51 to 80% MFI | 26% |
| Renter – Large Related 31 to 59% MFI | 205 | Owners – Other than elderly Moderate Income | 24% |
| Renter – All Other Households – Moderate Income | 147 | Renter – Elderly Households Moderate Income | 17% |
| Renter – Large Related 51 to 80% MFI | 97 | Renter – All Other Households – Moderate Income | 12% |
| Owners – Elderly Moderate Income | 52 | Owners – Elderly 51 to 80% MFI | 12% |
| Renter – Elderly Households Moderate Income | 39 | Owners – Elderly Moderate Income | 5% |
| Renter – Small Related Moderate Income | 37 | Renter – Small Related Moderate Income | 4% |
| Renter – Large Related Moderate Income | 0 | Renter – Large Related Moderate Income | 0% |

gave a higher priority to new construction and substantial rehab of houses for sale to low- to moderate-income buyers; 71% thought this should be a high or very high priority. Fifty-five percent (55%) of COIN respondents thought building new

homes on vacant lots is a very high or high priority, eighty percent (80%) felt developing housing accessible to people with disabilities was a very high or high priority, and 47% felt developing housing for senior citizens was a very high or high priority.

Applicants on KCDC's waiting list for tenant-based rental assistance often have difficulty finding suitable housing within the allotted time. The success rate over the past three years for finding housing has been 72% for regular vouchers and certificates and 68% for Mainstream vouchers.

In order to assess the availability of rental housing, we compared the low income rental population with the current inventory of assisted housing and affordable housing. Most assisted housing is occupied by tenants below 50% MFI. According to the CHAS Table, there are 15,769 renter households with incomes below 50% MFI.

Elderly Renter households - 3,754 of the renter households with incomes below 50% MFI are elderly households. There are a total of 2,017 assisted units for the elderly, leaving a gap of 1,737. Vacancies are tight at the privately owned elderly housing developments, from 0 – 4%. This is much lower than vacancies for other housing (see market analysis). KCDC has a waiting list of 40 elderly families for public housing and 55 elderly families for rental assistance. KCDC is able to house elderly families more quickly now that HUD has approved a plan to designate a portion of the elderly/handicapped housing for elderly. KCDC estimates the current waiting time for elderly families to range from 23 days to 30 days depending on the development. This is a reduction from a range of 35 days to 139 days before housing could be designated for elderly families. Also available for this category are private market efficiencies and 1 bedroom units. These small units are most likely to be affordable to lower income tenants and there appears to be an adequate number of affordable units for elderly households with incomes above 50% MFI – but not with the services many senior households are looking for.

Large Related Renter Households – There are only 810 very low income large related renter households, of which 491 are extremely low income. These households would need 3 or 4 bedroom units. There are a total of 412 four bedroom units in the assisted housing stock, and 1,075 3-bedroom units. KCDC's current waiting list for public housing has two

households waiting for 4 bedroom units and 31 families waiting for three bedroom units. The market analysis shows the vacancy rate for subsidized three bedroom apartments to be 8.4% vs 10.6% for non-subsidized units, and 5.3% for subsidized 4 bedroom units, compared to 20.8% for non-subsidized units. The families in this category also can qualify for rental assistance certificates and vouchers; however, large units within fair market rents are hard to find on the private market. There were only 80 three-bedroom units and no four-bedroom units within Fair Market Rents in the AAGK survey. Average rents for 3 and 4 bedroom units have increased substantially over the last five years, though the highest rent units are new student housing which rents by the bedroom.

Small Related Renter Households – There are 5,189 very low income small related renter households, 3,234 of which fall in the extremely low income category. These households will need 1 – 3 bedroom units. There are a total of 3,657 family units of 1-3 bedrooms in the assisted housing stock. In addition, there are 1,899 rental assistance certificates and vouchers for all household types. There are also 361 tax credit units and 124 HOME rental units, though these will generally be occupied in conjunction with a rental assistance certificate or voucher when tenants are very low income. Of 795 households on KCDC's Public Housing waiting list, 128 are families with children. 457 of 532 households on the Rental Assistance waiting list are families with children. However, this underestimates the need/demand for this program as the waiting list has been closed for 11 months to any family other than those that meet established preferences. Only a small percentage of private market units appear to have rents within the Fair Market Rents, meaning families with Vouchers are still likely to be paying more than 30% of their income for rent. There appears to be a need for additional units to serve small related renter households with incomes below 50% MFI. Tax credit units coming on line will help meet the need for units for this category, but additional rental assistance will also be needed to address affordability.

All Other Renter Households - There are 6,016 very low income renter households that do not fall into the elderly or related household categories. This category would include individuals with disabilities as well other single individuals and unrelated people living together. This category will mostly need efficiency apartments or one bedroom units. There are a total of 665 public housing units in elderly/housing developments that are not designated for elderly, plus 82 assisted units for persons with

of \$125 per month, and the assumption the buyer has the required down payment and meets credit criteria.

Though only large families with at least 80% of the MFI would be able to afford an average price three bedroom home, 36.5% of the sales in Knoxville during the first 10 months of 1999 sold for between \$40,000 and \$80,000, a price range affordable to many households between 50 and 80% MFI.

Sales Price Affordability

| Income/Family type | Individuals | Small Family* | Large Family** |
|---------------------------|--------------------|----------------------|-----------------------|
| 30% MFI | \$14,663 | \$19,500 | \$32,935 |
| 50% MFI | \$37,054 | \$45,115 | \$67,686 |
| 80% MFI | \$70,910 | \$83,808 | \$119,813 |
| 95% MFI | \$87,677 | \$100,933 | \$142,203 |

*uses income limits for family of 2 **uses income limits for family of 5

disabilities in group home/small development settings. People in this category who do not have a disability receive the lowest preference for most assisted housing. Of 795 families currently on KCDC's waiting list for public housing, 111 are families with disabilities and 516 that do not fall into the families with children, elderly or disability categories. 709 of the 795 families waiting for public housing need a one bedroom unit. In the AAGK survey, there were 351 efficiency units and 1,270 one-bedroom units affordable at the 50% rent limit. Very low income renters in this category show a need for additional units as well as assistance to make the units affordable. Large percentages (79.9% and 70%) of efficiency and one-bedroom units in the survey are affordable to renters at 65% MFI, showing less of a need in the Low income (below 80% MFI) renter category.

Families below 50% of median will have few purchase options except through special programs for low income buyers. Buyers between 50% and 80% of median will also often require subsidies to purchase existing and particularly new homes. Buyers at all income levels will often need down payment assistance and/or credit repair. 71.1% of agency respondents felt credit counseling was a very high or high priority and 55% felt homeownership training was a very high or high priority. The availability of new homes has been greatest outside the city limits. Within the city, the most development has taken place in the West and Northwest sectors.

Owner Housing - One option for improving housing conditions for low- to moderate-income tenants is homeownership. The table below shows what sales prices would need to be for low to moderate income tenants to afford a home. The estimates are based on the following guidelines: 95% loan, the THDA rate of 7.3% for 30 years for families within the THDA income limits and 8.5% for higher incomes, a 28% PITI to income ratio and an escrow payment

Overcrowding - When asked about problems with their current housing, 19% of respondents in the consumer survey indicated that their home was too small or crowded. 2% were unable to find a place to move to because their family is too large. At the time of the 1990 census, the incidence of overcrowding was 3% overall. However, the incidence of overcrowding is substantial for large related families, especially those of very low income. The rates were 33.8% overall for large families, 38.5% for large families from 0 – 30% MFI, 44.8% for large families from 31 – 50% MFI and 33.7% for large families from 51 – 80% MFI.

Accessibility - 9% of consumer survey respondents said their homes were a problem because they were not disability accessible. Eighty percent (80%) of COIN respondents felt developing housing accessible to people with disabilities should be a very high or high priority.

Neighborhood Issues - According to the consumer survey respondents, many of their housing problems had to do with the neighborhood and available services. 32% cited crime and safety concerns, 30% cited neighborhood conditions, 17% a lack of stores, and 9% a lack of public transportation.

Disproportionate Need - 1990 Census information was examined to determine if, for any of the income categories included in Table 2, any racial or ethnic group has a disproportionately greater need in comparison to the needs of the income category as a whole. Disproportionate greater need exists when the percentage of persons in a category is at least 10 percentage points higher than the percentage of persons in the category as a whole. At the time of the census, 50% of Knoxville’s households had low incomes (below 80% MFI), with 32% having very low incomes (below 50% MFI). The following table extracted from Table 1A of the CHAS shows the breakdown of racial/ethnic groups by income categories. Areas of disproportionate need are highlighted.

Black households and Asian & Pacific Islander

Households are disproportionately very low income. Native American Households disproportionately fall in the 51 – 80% MFI bracket. Additional information was provided in the CHAS Data Book for black households. Black low income renter households (0 –80% MFI) were less likely to have housing problems than low income renter households as a whole. However, the percentage of all black renter households with a housing problem was greater than renter households as a whole, but not enough to constitute a disproportionate need (47.4% vs 40.5%). Black homeowner households, though, showed a disproportionate need overall and in each low income category. When broken down further by family type, the disproportionate need for black homeowner households with incomes less than 50% MFI showed up for elderly and large family households, but not for small family households.

Special Needs- Not Homeless

Elderly/Frail Elderly – The estimated total of elderly persons over the age of 65 in Knox County in 1997 was given as 47,638, an increase of 11.5% from the 1990 total of 42,690. Information from the Tennessee Department of Health states that the frail elderly population in Knox County for 1997 was 5,118, an increase of 26.5% from the 1990 total of 4,043. Of persons over the age of 65, it was estimated that 3.7% were in a nursing home facility.

In addition to the existing supportive housing and services available, the following have been identified

Disproportionate Need

| Households | Total Households 1990 | % of Total Households | % Very Low Income 0 – 50% MFI | % Other Low Income 51 – 80% MFI | % Moderate Income 81 – 95% MFI | % Above 95% MFI |
|--|-----------------------|-----------------------|-------------------------------|---------------------------------|--------------------------------|-----------------|
| White | 59,150 | 85% | 29% | 17% | 8% | 45% |
| Black (non-Hispanic) | 9,569 | 13.7% | 52% | 17% | 6% | 25% |
| Hispanic (all race) | 330 | 0.47% | 34% | 26% | 7% | 34% |
| Native American (non-Hispanic) | 263 | 0.38% | 32% | 35% | 2% | 31% |
| Asian & Pacific Islanders (non-Hispanic) | 656 | 0.94% | 47% | 16% | 9% | 28% |
| All Households | 69, 973 | 100% | 32% | 18% | 8% | 42% |

as needs for the elderly and frail elderly:

1. Affordable assisted living to include low- to moderate- and middle-income persons and families.
2. Homemaker services and aids for low income
3. Transportation to non-medical places for daily living (grocery store, library, etc.)
4. Funding assistance for medications
5. Recreation centers

Physically Disabled – Tennessee Department of Health self-reporting data indicated that 10.21% of Knox County residents were disabled or functionally impaired.

In addition to supportive housing services, the following have been identified as needs for this population segment:

1. More variety in accessible Section 8 housing.
2. Expanded public transportation.
3. Homeownership opportunities.
4. Visitable housing.

Developmentally Disabled – The Tennessee Department of Mental Health and Retardation indicated that 3% of persons living within Knoxville/ Knox County were developmentally disabled.

The continued needs of this population have been identified as:

1. Increased funds to staff supportive housing sites.
2. Case management to ensure overall stability.
3. Transitional housing from State centers into community.

Severe Mental Illness and Alcohol/Drug Addiction – Estimates are not currently available on the numbers of persons in the Knoxville area who suffer from severe mental illness. Self-reporting data provided by the Tennessee Department of Health noted that 7.74% of persons surveyed were addicted to or had recently used alcohol or drugs.

Persons working in the field of severe mental illness note the following needs for this segment of the community:

1. Transitional housing for mentally ill returning

to community from hospital stay.

2. Intensive case management
3. Supervised group homes.
4. Increased transportation options.

Persons working in the field of alcohol and drug addiction recovery note the following needs for the population:

1. Structured housing for women.
2. Transitional housing with appropriate supportive services
3. Intensive case management

HIV/AIDS – A surveillance report provided by the Tennessee Department of Health, Communicable Disease Control, indicated a total of 625 HIV/AIDS cases currently within Knox County. This included 308 cases of full-blown AIDS and 317 cases of HIV. This population can be very transient and includes persons that have moved from the rural areas where no services exist to Knoxville where assistance can be found on some level. Many of those diagnosed with HIV/AIDS also have alcohol and drug addictions that require treatment. Additionally, many are persons with criminal records that cannot receive Section 8 or Mod/Rehab assistance.

Service providers for the HIV/AIDS population identified the following as unmet needs:

1. Supervised living with 24-hour case management.
2. Halfway houses for women and their children with continued alcohol and drug treatment.
3. Transitional housing.
4. Long-term mental health treatment.
5. Long-term drug and alcohol treatment.
6. Community awareness.

Needs of Public Housing - KCDC currently has 3,603 public housing units available: 930 0-BR, 793 1-BR, 827 2-BR, 657 3-BR, 268 4-BR and 128 5-BR units. 162 of these units are handicapped accessible. There are currently 795 families on the public housing waiting list. 709 families are waiting for a one-bedroom unit, 53 for a two-bedroom, 31 for a three-bedroom and 2 for a 4-bedroom unit. There is a waiting list of 532 families on KCDC's

Section 8 tenant-based waiting list. This waiting list has been closed for 11 months except to applicants with verified preferences. A number of applicants on KCDC’s public housing and rental assistance waiting lists are currently residents of public housing.

KCDC’s housing stock is in good repair with efforts continually being made to improve the physical buildings as well as the quality of life for residents living there. The attached excerpts from KCDC’s annual and five-year plans show the improvements planned for different public housing developments over the next five years. (See Appendix B for the KCDC Capital Fund Annual Program Statement and optional 5-Year Action Plan for Capital Fund) In addition, KCDC is in the midst of a HOPE VI revitalization effort. The units at College Homes in Mechanicsville have been demolished and redevelopment is underway.

KCDC conducted a Section 504 needs assessment in accordance with 24 CFR 8.25. All common facilities were made handicapped accessible in accordance with federal regulations. Where possible, up to 5% of all dwelling units were made accessible. Accessible units are well distributed throughout KCDC’s inventory. KCDC has not had a problem with housing families with the need for accessible units, but should the waiting time for families needing accessible units increase significantly, KCDC will reconfigure units in family developments to address this demand.

Lead-Based Paint Hazards – We have estimated the number of housing units that contain lead-based

paint hazards, and the number occupied by extremely low-income, low-income, and moderate income families based on the age of the housing stock at the time of the 1990 census.

These are estimates only and have not been verified by field testing. The City will conduct some sample testing in order to further evaluate the prevalence of lead-based paint prior to implementation of the new lead-based paint regulations.

According to a State of Tennessee study based on 1990 Census information, there are 25,457 children under the age of 5 years at risk in Knox County. The Knox County Health Department has records tracking cases of lead poisoning. The Health Department assesses children receiving WIC and receiving services through the Health Department. The Health Department screens all WIC recipients under age 6 for lead poisoning. If screens indicate a child under the age of 6 is at risk for lead poisoning, a blood test is performed. If that child has high blood levels of lead, the Health Department inspects and makes an assessment of the child’s housing unit and any other units where the child may spend time (i.e. grandparents, child care, etc.) Confirmed cases of lead-based paint poisoning were investigated at 13 addresses within the City of Knoxville.

Barriers to Affordable Housing - The following conditions seem to have the greatest effect on housing affordability in Knoxville:

Building Codes – Compliance with current building codes sometimes make the reuse of existing buildings cost prohibitive.

Estimate of Lead-Based Paint Hazards

| Year Housing Constructed | Number of Units Built before 1980 | Estimated % of Units with LBP | Estimated Number of Units Occupied by low and extremely-low income (0 – 50% MFI) | Estimated Number of Units Occupied by Moderate Income (\$1 – 80% MFI) | Estimated Number of Units with LBP | Estimated Number of extremely-low and low income units with LBP | Estimated Number of moderate income units with LBP |
|--------------------------|-----------------------------------|-------------------------------|--|---|------------------------------------|---|--|
| Before 1940 | 11,387 | 90% | 5,817 | 3,532 | 10,248 | 5,235 | 3,179 |
| 1940-1959 | 23,724 | 80% | 9,088 | 10,185 | 18,979 | 7,270 | 8,148 |
| 1960-1979 | 26,499 | 62% | 10,024 | 12,005 | 16,429 | 6,215 | 7,443 |
| Total Older Housing | 61,610 | | 24,929 | 25,722 | 45,656 | 18,720 | 18,770 |

Development Applications and Permits – The application process can be complicated and difficult to navigate, especially for the uninitiated. One commenter at the December 7th public input meeting recounted problems with Building Inspections. However, as the commenter gave more detail, his problems appeared to be associated more with the zoning and subdivision regulations. This sort of misunderstanding is not unusual and it emphasizes the difficulties faced by those who are unfamiliar with the processes. It is not only confusing, but the requirements of one bureaucracy sometimes conflict with another.

Problems seem to be more frequently encountered on the older, small inner-city lots. The City adopted the ward map system in 1933, but ward maps were not consistently updated when property transfers and division of parcels occurred over time. Applications for permits are based on ward map descriptions, while property lines and lot sizes shown on deeds frequently differ from outdated information on ward maps. The current permit approval process requires these discrepancies to be reconciled by recording new plats. Unless the applicant controls or has the cooperation of the owners of adjacent parcels, correcting the plat for one parcel often leaves small remnants which the system does not automatically reconcile. Until recently, the City did not have a clear policy for dealing with this situation. Even with a consistent policy, the process is lengthy, often requiring approval of the Board of Zoning Appeals and the full Metropolitan Planning Commission. With application deadlines, publication requirements, and once-a-month meeting schedules, the process can take months.

Zoning and Land Use – Existing low-income neighborhoods often contain a mix of land uses. When building new infill housing or replacing dilapidated housing with new homes in these locations, zoning must be appropriate for residential redevelopment. Correcting inappropriate zoning adds to the length of process and approval may be difficult to obtain for individual parcels. If changes to the One-Year Plan are involved, applications are automatically delayed until the next quarterly deadline.

Development of confined spaces typical in the inner-city often requires creative solutions which are difficult to obtain approval for under subdivision regulations which were written for development of open spaces on the perimeter of urban areas.

Acquiring and Assembling Inner City Parcels – The private developer may encounter insurmountable difficulties when trying to assemble larger tracts for redevelopment. The small typical inner city parcel size and corresponding large number of parcels involved, increases the probability that title defects will be encountered.

Increasing Cost of Construction:

Lead Paint Regulations – New regulations take effect on September 15, 2000 regarding handling and removal of lead paint in rehabilitation projects using federal money as a funding source. Projections for increased project costs are in the range of \$10,000 to \$15,000 for a comprehensive rehab project. No money is being provided to supplement this increased cost of rehab, therefore total production is expected to decrease. The existing waiting list of 500 applicants for rehab assistance will undoubtedly grow more rapidly as production decreases.

An increase of \$10,000 in construction costs will move many rehabs into the infeasible cost range which will result in more replacement houses being done where a lesser cost rehab would have worked before. Many applicants may not be able to afford the increased project costs.

Material and Labor Costs – The average contract price for replacement houses has increased 13% in the past 5 years. In 1994, two bedroom houses were being built for an average of \$35,408 and three-bedroom for \$42,500. In 1999 comparable houses were averaging \$40,121 and \$48,109. Average rehab project costs have increased 42% over the same time period.

III. PRIORITY HOUSING NEEDS

Table 2A identifies a level of priority for each category of income and family type. If a category is rated as a “High” priority, activities to address this need will be funded by the City of Knoxville with federal funds either alone or in conjunction with the investment of other public or private funds during the 5 years of this Consolidated Plan. If funds are available, the City may fund activities of a “Medium” priority with federal funds either alone or in conjunction with the investment of other public or private funds during the 5 years of this Consolidated Plan. Also, the City will take actions to help locate other funds to address these needs. The City will not fund activities of a “Low” priority with federal funds. However, the City will consider certifications of consistency for other entities’ applications for federal assistance.

Based on the above review of housing needs, the following priorities were identified:

High Priorities

Extremely Low and Very Low Income Renter Households - all household types

67.4% of these households have a housing problem compared with 40% of renter households in the city as a whole. Housing problems exist in the areas of condition, affordability, availability, as well as overcrowding for large families and accessibility for persons with disabilities.

Extremely low, very low and other low income homeowners

53% of these households have a housing problem (63.7% of very low) compared with 30% of homeowners in the city as a whole. Housing problems exist in the area of condition, affordability of utilities and repairs, as well as overcrowding for large families and accessibility for persons with disabilities.

Medium priorities

Low Income Renter Households - all household types
39% of these households have a housing problem compared with 40% of renter households in the city

as a whole. These households are better able than very low income renters to afford private market units but at the lower end of the income grouping, still need assistance. This is a prime category for first time home buyer programs.

Special populations

The number of households in this category in need of housing assistance is not available but a need obviously exists. Because HUD funds housing for special needs populations through competitive programs, the City does not plan on targeting funding to this group. However, it is expected that this population will be assisted through programs to assist low-income renters.

IV. FIVE-YEAR HOUSING PLAN

Specific Housing Objectives for the City of Knoxville – Table 2C-Housing identifies specific housing objectives that the City hopes to achieve over the five years of the Consolidated Plan. (See objectives H-1 through H-6.)

The characteristics of the housing market indicate that there are needs for a variety of activities to address the housing needs of low- to moderate-income residents. The very high percentage of substandard housing, particularly in the Central, East and South sectors shows the need for rehabilitation programs for both homeowners and rental property. Rehabilitation programs will improve housing conditions, help to keep utility and maintenance costs down, help to stabilize neighborhoods, help to make units accessible, and help improve the condition of lower rent rental property without requiring an excessive rent increase. Additional rental assistance is also sorely needed to help tenants afford private market rental units. Additional affordable rental units that qualify for rental assistance are also needed, as well as units affordable to single individuals without rental assistance. These needs may be met through new construction and/or substantial rehabilitation. Acquisition of existing units is another option when this will result in keeping units in the affordable inventory. New construction and substantial rehabilitation is needed to meet the need for

Table 2C – Housing
Summary of Specific Housing and Community Development Objectives
(Table 2A/B Continuation Sheet)

Applicant's Name: City of Knoxville, TN

Priority Need Category
Housing

Specific Objective
Number H-1

Use CDBG and HOME funds, in conjunction with State and private resources, to provide financing to rehabilitate or replace 250 owner-occupied homes in substandard condition. Five year goal = 40 extremely low, 80 very low and 130 low income households by June 30, 2005. Annual goal = 8 extremely low, 16 very low and 26 low income households.

Specific Objective
Number H-2

Use CDBG and HOME funds, in conjunction with private resources, to provide financing to rehabilitate 250 affordable rental units. Five year goal = 100 extremely low, 100 very low and 15 low income renter households by June 30, 2005. Annual goal = 20 extremely low, 20 very low and 10 low income households.

Specific Objective
Number H-3

Use CDBG funds, in conjunction with State funds, HOPE 3 funds and sale proceeds, and private resources to provide homeownership opportunities, including financing and training, for low- to moderate-income homebuyers. Also provide homeownership opportunities for non-low-income households when part of the Neighborhood Revitalization Strategy, such as Bringing Home the Badge Program. Five year goal = 10 extremely low, 195 very low and 195 low income renter households by June 30, 2005. Annual goal 2 extremely low, 39 very low and 39 low income households

Specific Objective
Number H-4

Use HOME CHDO set-aside funds to assist Community Housing Development Organizations in their activities to develop housing for sale or rent to low- to moderate-income purchasers; and to develop housing to be used as supportive transitional or permanent housing for special needs populations. Five year goal = 8 extremely low (special populations), 12 very low and 20 low income renter households by June 30, 2005. Annual goal = 2 extremely low, 2 very low and 4 low income households.

Specific Objective
Number H-5

Use CDBG funds to acquire blighted houses and lots to be sold for the purpose of clearing blight and developing housing opportunities, primarily homeownership and especially for low- to moderate-income households. Five year goal = 5 extremely low, 50 very low and 75 low income and 20 moderate income households by June 30, 2005. Annual goal = 1 extremely low, 10 very low, 15 low and 4 moderate income households.

Specific Objective
Number H-6

Use CDBG funds to provide assistance for emergency and small repairs.
Five year goal = 350 extremely low, 350 very low income households by June 30, 2005. Annual goal = 70 extremely low, 70 very low.

affordable homes for first-time homebuyers, as well as affordable financing and support services such as credit counseling and homeownership training.

As there are numerous needs and limited resources, the City will target the federal resources it receives at activities not being addressed through the private market, PHA activities, or HUD competitive programs. As Knoxville is also an Empowerment Zone, the City will also target its federal housing funding at activities that address the goals of the Empowerment Zone plan (i.e., the neighborhood revitalization strategy) while meeting housing objectives. These activities include rehabilitation, new construction to replace demolished housing and infill new construction where it contributes to neighborhood revitalization.

Public Housing Strategy – KCDC, a high performing public housing agency, has recently completed an Agency Plan – a 5-year plan and an annual plan. The 5-Year Plan describes the KCDC’s mission and long-range goals and objectives for achieving the mission over the next 5 years. The Annual Plan provides details about KCDC’s immediate operations, programs and services, and the agency’s operational strategies for the upcoming fiscal year.

KCDC’s strategies to serve the needs of extremely low-income, low-income, and moderate-income families served by the public housing agency include: addressing revitalization and restoration needs of public housing projects within the jurisdiction; improving the management and operation of public housing; and improving the living environment of extremely-low-income, low-income, and moderate-income families residing in public housing are covered in the Agency Plan.

KCDC’s Five Year Strategic Goals and Objectives are outlined in chart on the following page.

KCDC’s strategies for addressing needs during the upcoming year are outlined in the page following the Strategic Goals and Objectives chart.

The City of Knoxville addresses the needs of public housing and activities to encourage public housing residents to become more involved in management and participate in homeownership as part of the Empowerment Zone Plan. Public housing residents will be encouraged to participate in the Zone Area Councils (ZAC’s) which will make decisions on priorities for their neighborhoods. Public Housing Residents are encouraged to participate in homeownership through marketing efforts targeting public housing residents for the HOPE 3 homeownership program and the FirstHome Program. Residents of public housing are given a preference under the HOPE 3 Homeownership Program. The City of Knoxville has given priority in its housing and other community development programs to the Mechanicsville community in support of KCDC’s HOPE VI project underway in that neighborhood.

Barriers To Affordable Housing

Building Codes: The City is currently researching building codes models, seeking alternatives which will make reuse of existing structures more feasible and affordable.

Development Applications and Permits: Over the past year, City Engineering has developed a policy to handle unbuildable remnant parcels left over when new plats are recorded to correct the ward map. An individual owner can now record their plat without participation from neighboring owners. Resulting remnant parcels are flagged by City Engineering as substandard, unbuildable and remain so until the neighboring parcels are re-platted to bring them into compliance.

Zoning and Land Use: Recent creation of conservation districts and overlays provides a new mechanism for dealing with unique inner city neighborhoods where diverse uses are appropriate for a small area.

Acquiring and Assembling Inner City Parcels: The City has used redevelopment authority to resolve these problems on a large scale, where appropriate.

KCDC's Five Year Strategic Goals and Objectives

To enhance the marketability of public housing units.

- Implement site-based waiting lists.
- Establish customer relations component and agency wide policy.
- Conduct market study to identify assets and needed improvements.
- Use capital funds to begin making improvements identified by market study.
- Implement outreach program to inform civic groups and community agencies of improvements.
- Reduce crime in developments.

To reduce low-rent public housing's dependency on HUD subsidy.

- Implement an asset management plan.
- Implement individual management plans (including project-based: budgeting) for each development.
- Implement measures to deconcentrate poverty by bringing higher income public housing households into lower income developments.
- Implement measures to promote income mixing in public housing.
- Establish and maintain an operating reserve that complies with Public Housing Assessment System (PHAS) requirements.
- Increase the percentage of rents collected.
- Increase average tenant rents.
- Secure non-HUD sources of income.

To adapt KCDC's housing stock and program resources to more closely meet community needs.

- Develop rent policies that attract low-income working families who have rent burdens of more than 30 percent of income.
- Conduct a study to determine feasibility of adapting housing units for special needs populations.

To expand the range and quality of affordable housing choices in the community.

- Apply for Low Income Tax Credit allocation and Federal Home Loan Bank Affordable Housing Program funds to build rental assistance units.
- Conduct a study to identify potential sites and determine feasibility of acquiring/building rental housing in proximity to centers of employment.
- Establish a program to help participants use tenant-based Section 8 vouchers toward homeownership.
- Partner with nonprofit and/or for-profit developers to expand affordable housing.
- Acquire, rehabilitate and/or construct properties throughout the community to increase affordable housing, preferably in non-impacted areas.
- Designate up to 15% of Section 8 vouchers for KCDC-owned project-based units to promote deconcentration of low-income families.

To promote resident services and support.

- Improve access of public housing residents to services that support economic opportunity and quality of life.
- Promote measures to ensure that residents receiving TANF will get off public assistance in their allotted time period without a penalty.
- Assist families to voluntarily move from assisted to unassisted housing.
- Work with partners to increase in the number of residents who are working or engaged in job training.

To promote economic development and redevelopment in the community.

- Continue to assist the city and county governments as well as the airport authority with their economic and redevelopment projects throughout the two county area.
- Develop entrepreneurial strategies to enhance economic development.
- Continue to prepare and implement redevelopment plans throughout the community.

To ensure equal housing opportunities.

- Promote measures to ensure access to assisted housing regardless of race, color, religion, national origin, sex, familial status, and/or disability.
- Undertake measures to provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and/or disability.
- Promote measures to ensure accessible housing to persons with disabilities regardless of unit size required.

Source: KCDC Public Housing Agency Plan, FY2001

KCDC Annual Strategies for Addressing Needs

Need: Shortage of affordable housing for all eligible populations.

Maximize the number of affordable units available to the PHA within its current resources by:

- Reduce turnover time for vacated public housing units.
- Seek replacement of public housing units lost to the inventory through mixed finance development.
- Maintain or increase Section 8 lease-up rates by establishing payment standards that will enable families to rent throughout the jurisdiction.
- Maintain or increase Section 8 lease-up rates by marketing the program to owners, particularly those outside of areas of minority and poverty concentration.
- Maintain or increase Section 8 lease-up rates by effectively screening Section 8 applicants to increase owner acceptance of program.
- Participate in the Consolidated Plan development process to ensure coordination with broader community strategies.

Increase the number of affordable housing units by:

- Apply for additional Section 8 units should they become available.
- Leverage affordable housing resources in the community through the creation of mixed – finance housing.
- Pursue housing resources other than public housing or Section 8 tenant-based assistance.

Need: Specific Family Types: Families at or below 30% of median.

Target available assistance to families at or below 30% AMI by:

- Employ admissions preferences aimed at families with economic hardships.
- Adopt rent policies to support and encourage work.

Need: Specific Family Types: Families at or below 50% of median.

Target available assistance to families at or below 50% of AMI by:

- Employ admissions preferences aimed at families who are working.
- Adopt rent policies to support and encourage work.

Need: Specific Family Types: Families with Disabilities

Target available assistance to Families with Disabilities:

- Apply for special-purpose vouchers targeted to families with disabilities, should they become available.
- Affirmatively market to local nonprofit agencies that assist families with disabilities.

Need: Specific Family Types: Races or ethnicities with disproportionate housing needs

Increase awareness of PHA resources among families of races and ethnicities with disproportionate needs:

- Provide a suitable living environment for families living in assisted housing, regardless of race, color, religion, national origin, sex, familial status, and/or disability.
- Council Section 8 tenants as to location of units outside of areas of poverty or minority concentration and assist them to locate those units.
- Conduct activities to affirmatively further fair housing. Market the Section 8 program to owners outside of areas of poverty/minority concentrations.
- Market the Section 8 program to owners outside of areas of poverty/minority concentrations.

Source: KCDC Public Housing Agency Plan, FY2001

Another mechanism for acquiring individual parcels, especially abandoned and blighted property is the Blighted Property Acquisition process, which provides for condemnation of individual parcels by use of eminent domain. This is part of a codes enforcement process, which provides for marketing of acquired property through the Homemakers Program. Buyers agree to redevelop purchased property within 12 months of receiving title. This program was implemented in 1991, but only recently has it been utilized effectively.

Manufactured Housing: In 1999 Knoxville passed an ordinance allowing for placement of manufactured housing on standard city lots. This could open up a

market for an affordable housing product, which was previously unavailable.

Increased Project Costs:

Increases in material and labor costs associated with rehab projects and new construction are inevitable results of time. When budgets are fixed, they naturally result in decreased production. The City will be seeking new partnerships that utilize outside sources of funds to supplement limited existing funds. Existing subrecipients will be encouraged to expand their resources while reducing their dependence on City funds.

Continuing to fund minor home repair programs will provide the community with emergency assistance and a mechanism to deliver minor repairs. Often this assistance keeps owners in their homes until they can progress through long waiting lists for full rehab programs.

The full impact of new lead paint requirements has not yet been realized. It is evident that there will be a training and implementation period when production will be reduced, both due to staff burden and due to a lack of trained contractors. Training for contractors will need to be provided locally.

Lead-Based Paint Hazards – The following steps are planned for implementation of lead paint regulations:

- (May) Assess impact on Empowerment Zone
- (May) Create Lead staff team to explore options:
 - Lead safe relocation house locations
 - Lead disposal site
 - Create Supply list for contractors
 - Develop a list of certified contractors
 - Compile Laboratory list
- (June) Notification of contractors regarding new regulations.
- (June) Arrange local Lead training for supervisors and contractors.
- (May) Draft and revise pre-bid checklists and other administrative forms
- (May) Contact Knox County about doing joint demonstration project
- (June) Send selected staff to Ga. Tech for Lead Paint Inspecting and Risk Assessment courses
- (July) Register for state certification exam (if applicable)
- (June) Order XRF Analyzer Gun (if needed)
- (June) Arrange demonstration project
- (July) Select contractor for demonstration project
- (July) Discuss changes in contract language with Law Department
- (July) Order pamphlets
- (Aug) Re-write specification software
- Apply for additional funding for lead reduction management (ongoing)

Fair Housing – In July 1999, the City of Knoxville completed its latest analysis of fair housing impediments, entitled “Everyone Can Be a Good Neighbor.” A listing of actions to be take to affirmatively further fair housing and to overcome impediments to fair housing will be included in each year’s annual action plan.

The findings of the analysis indicate the following as impediments to fair housing:

- Lack of public awareness about the rights and responsibilities under the federal and local fair housing laws.
- Lack of awareness of discriminatory practices among housing providers.
- Lack of diverse (both in terms of type and geographical location) and affordable housing.
- Lack of opportunities and resources for the homeless, elderly, and persons with disabilities.
- Lack of full integration that could bring about parity in Knoxville’s communities.

Continued efforts will be made to educate practitioners, citizens, and groups about the Fair Housing Act and the positive aspects of living in a diverse community. As discussed throughout this Plan, efforts to create affordable housing throughout Knoxville are underway by the City, nonprofit and for-profit developers.

NON-HOUSING STRATEGY

I. NON-HOUSING COMMUNITY DEVELOPMENT PLAN

Background – The non-housing community development plan is based on the Knoxville/Knox County Empowerment Zone Strategic Plan, the “Prospectus for Empowerment.” A copy of this document is included as Appendix C. The focus of the plan will be on the Zone’s 19 census tracts which cover 16 square miles of the central portion of Knoxville. The Zone includes the most distressed portions of the community; it is home to more than 48,000 residents and includes the neighborhoods surrounding all but one of Knoxville’s public housing developments. The Empowerment Zone governance plan aims to make special efforts to ensure that the needs of public housing developments and the surrounding neighborhoods are addressed in the implementation of the EZ plan.

Most of the funding to achieve the objectives described in this section will come from either Empowerment Zone Round II funding or from other sources yet to be identified. Resources from CDBG funding will support these initiatives when possible. Funding is not currently in place to undertake all of these long-term objectives.

Strategic vision for change – The strategic vision for change, which is drawn directly from the Prospectus for Empowerment, is as follows: The year is 2010. The Knoxville/Knox County, Tennessee Empowerment Zone is widely recognized as one of America’s most desirable places to live, work, and raise a family. Creation of new job opportunities, as well as retention and expansion of existing businesses, has fostered the rebirth of the Empowerment Zone. A spirit of entrepreneurship and community capitalism emanates from the Zone. East Tennessee’s principal centers of government, finance, and cultural entertainment are located here. The downtown area is vibrant, with a newly invigorated office core, festive waterfront, and growing residential population. Housing is available for a wide range of family sizes and incomes. The

historic, traditional neighborhoods near downtown are accessible and reconnected, attracting families and individuals looking for a central location, convenient services, and an affordable housing supply. Community involvement has never been stronger in Knoxville. Residents and businesses in the Empowerment Zone have a strong voice in local government policy-making. The Zone is thriving and self-sustaining; the area no longer would qualify for a federal Empowerment Zone designation.

Priority non-housing community development needs – Table 2B contains a summary of priority non-housing community development needs. The priority levels have been established based upon review of public input, information received in consultations with other agencies, and funding availability. Needs identified as High Priority should expect to have funding allocated to them during the time period covered by this Consolidated Plan. Needs identified as Medium Priority may have funding allocated to them if there is sufficient funding available; the City will generally provide certifications of consistency for applications for grant funds to address these needs. Needs identified as Low Priority are not expected to receive funding through this Consolidated Plan; the City will consider providing certifications of consistency for applications for grant funds to address these needs. According to the HUD Consolidated Plan guidelines, the estimated number of units and estimated dollars to address these needs are not required information; since adequate data is not readily available to accurately respond to these questions, the City has left these fields in the table blank.

Community development objectives – All of the community development objectives identified below are consistent with the statutory goals of the HUD funding programs. All of the objectives fall into one or more of the statutory goal categories: decent housing; suitable living environment; or expanded economic opportunities. All of the activities primarily either assists low- to moderate-income persons or areas or eliminates slum and blighting conditions. As noted above, the majority of funding for these objectives will come from the Round II

**TABLE 2B
COMMUNITY DEVELOPMENT NEEDS**

| PRIORITY COMMUNITY DEVELOPMENT NEEDS | Priority Need Level High, Medium, Low, No Such Need | Estimated Priority Units | Estimated Dollars to Address |
|--|--|-------------------------------------|---|
| PUBLIC FACILITY NEEDS | | | |
| Neighborhood Facilities | M | | |
| Parks and/or Recreation Facilities | M | | |
| Health Facilities | M | | |
| Parking Facilities | L | | |
| Solid Waste Disposal Improvements | L | | |
| Asbestos Removal | L | | |
| Non-Residential Historic Preservation | M | | |
| Other Public Facility Needs | L | | |
| INFRASTRUCTURE | | | |
| Water/Sewer Improvements | M | | |
| Street Improvements | M | | |
| Sidewalks | M | | |
| Sewer Improvements | M | | |
| Flood Drain Improvements | M | | |
| Other Infrastructure Needs | M | | |
| PUBLIC SERVICE NEEDS | | | |
| Handicapped Services | M | | |
| Transportation Services | M | | |
| Substance Abuse Services | M | | |
| Employment Training | M | | |
| Health Services | M | | |
| Other Public Service Needs | M | | |
| ANTI-CRIME PROGRAMS | | | |
| Crime Awareness | M | | |
| Other Anti-Crime Programs | M | | |
| YOUTH PROGRAMS | | | |
| Youth Centers | M | | |
| Child Care Centers | M | | |
| Youth Services | M | | |
| Child Care Services | M | | |
| Other Youth Programs | M | | |
| SENIOR PROGRAMS | | | |
| Senior Centers | M | | |
| Senior Services | M | | |
| Other Senior Programs | M | | |
| ECONOMIC DEVELOPMENT | | | |
| Rehab; Publicly- or Privately - Owned Commercial/Industrial | M | | |
| CI Infrastructure Development | M | | |
| Other Commercial/Industrial Improvements | M | | |
| Micro-Enterprise Assistance | M | | |
| ED Technical Assistance | M | | |
| Other Economic Development | M | | |
| PLANNING | | | |
| Planning | H | | |
| TOTAL ESTIMATED DOLLARS NEEDED: | | | |

Empowerment Zone program, if that program receives full funding from Congress.

Long-term community development objectives – The long-term community development objectives for this plan are:

- Grow business capital
- Create a climate that encourages business start-up and expansion
- Create sustainable mixed tenure and income communities
- Increase housing choice and restart the housing ladder
- Improve job readiness
- Eliminate institutional barriers to economic opportunity and self-sufficiency
- Strengthen family ties
- Promote civic attachment and community building
- Promote pride of place

Strategies for reaching the community development objectives – The following strategies are identified in the Empowerment Zone Strategic Plan as means of reaching the goals/objectives:

- Develop sites to bring in new industrial/commercial development
- Improve and/or expand existing businesses
- Create job training programs that match skills to market needs
- Incubate and provide mentoring for start-up businesses
- Increase availability of loans for businesses
- Provide easy to understand how-to information to business start-ups and existing small businesses
- Construct a virtual information highway to the Zone to provide exposure, training, and jobs
- Provide resources to help existing homeowners maintain their homes
- Develop financing programs that provide an incentive to move into Zone neighborhoods and encourage existing residents to remain
- Implement comprehensive redevelopment initiatives targeted at neighborhoods' unique problems
- Grow home buyers through long-term training,

education, and counseling programs

- Develop easily accessible resource centers where Zone residents can find transportation services, child care, health care, and a clearinghouse of information on existing resources;
- Develop or expand training options available for Zone residents and improve access to these training opportunities
- Develop or expand individual and family self-sufficiency programs
- Ensure healthy starts through strategic and assertive offerings of support to first-time mothers and school-based care for under-served children
- Transform Zone schools by increasing the frequency and degree of parental involvement in their children's education
- Develop initiatives that help nurture a sense of identity, sharing, participation, and fellowship among neighbors
- Develop initiatives that improve the visual appearance of the community and create a sense of civic pride

Short-term community development objectives – Specific short-term community development objectives are identified in Table 2C-Nonhousing.

Neighborhood revitalization strategy area – The City of Knoxville requests approval of the Knoxville/Knox County TN Empowerment Zone Strategic Plan as a neighborhood revitalization strategy area plan. A copy of the Empowerment Zone Strategic Plan is included as Appendix C. The plan includes measurable outputs for years one and two of implementation as well as outcomes for the ten-year period. In addition, the chart on the next pages integrates the benchmarks from projects that have been funded through the EZ to date with related projects receiving support from CDBG, HOME, and ESG.

Economic empowerment of low income residents – The Empowerment Zone Strategic Plan focuses on the economic empowerment of lower income residents through attracting employers to provide jobs, through increased access to capital to promote

Table 2C -Nonhousing
Summary of Specific Housing and Community Development Objectives
(Table 2A/B Continuation Sheet)

Applicant's Name _____
 City of Knoxville, Tennessee

Priority Need Category

Planning/Administration

Specific Objective

Number P/A-1

Use CDBG, HOME, and ESG funds to operate Community Development program to deliver services, including Housing Rehabilitation Programs, Homeless Assistance activities, Blighted Property Acquisition Program, various revitalization initiatives, and subrecipient projects through June, 2005. Specific goals include development of Consolidated Plan, Annual Action Plan, annual Performance Report (CAPER), and EZ Annual Report.

Priority Need Category

Public Services

Specific Objective

Number PS-1

Use CDBG funds to provide technical assistance and/or design assistance to at least 10 neighborhood groups and community organizations per year, through June 2005.

Specific Objective

Number PS-2

Use ESG and CDBG funds to provide services for homeless assistance and fair housing assistance to at least 225 persons per year through June 2005.

Priority Need Category

Public Facilities

Specific Objective

Number PF-1

Use CDBG funding to assist with renovation of two community facilities by June, 2001.

Priority Need Category

Infrastructure/Public Improvements

Specific Objective

Number I-1

Use CDBG funding to assist with infrastructure improvements in Downtown Knoxville and/or Empowerment Zone neighborhoods when possible; implement at least three projects by June 2005.

entrepreneurial activity, and through training and technical assistance to build skills needed to access economic opportunities. More detailed discussion of these strategies is included in the EZ Strategic Plan.

II. ANTI-POVERTY STRATEGY

The Knoxville/Knox County Empowerment Zone Strategic is the basis of Knoxville's anti-poverty strategy. The focus of the EZ plan is on creation of economic opportunity for low-income residents and on sustainable community development that will make the Zone an attractive place for these residents to remain as they improve their economic status. Goals identified in the EZ plan include creating more than 2,000 new jobs over the next ten years, increasing per capita income in the Zone by 5.8% per year over the next ten years, and increase the number of Zone residents in the workforce to produce comparable labor force participation with the city as a whole. Attainment of these goals depends upon, among other factors, availability of adequate resources to fully implement the plan; at this time, these resources are not yet committed.

As described in the Institutional Structure section of this plan, the Prospectus for Empowerment was developed with input and cooperation from assorted agencies and individuals. Implementing agencies have been asked to identify other groups within the jurisdiction to assist in the achievement of the goals. Through this process, a network of providers is available to assist in referral and coordination of service. Those residents who live within the Empowerment Zone will have information readily available from their neighborhood representatives. A major task of the representatives will be the dissemination of program opportunities for individuals, businesses, and the community as a whole. Included in this information will be programs outlined in this Plan specifically dealing with affordable housing and economic development.

In addition, the City has identified assistance to microenterprise as a high priority for the next five years. This type of investment can help low-income

individuals to move out of poverty. KCDC, the public housing authority, operates self-sufficiency programs to help move its residents out of poverty. Additionally, KCDC operates an Individual Development Account (IDA) program that allows public housing residents working toward self-sufficiency to save and receive match money for the purchase of a home or car, or to start a small business. This program provides economic literacy training and information and referral to participants. The Knoxville/Knox County Community Action Committee operates the Head Start program. This program offers services throughout Knoxville with assistance for the whole family. Recipients are given the opportunity to participate in a variety of programs to assist them with greater self-sufficiency.

Action Plan for the Neighborhood revitalization Strategy

| Strategy | Action | Performance Benchmark | Primary funding source | 2000 | 2001 | 2002 | 2003 |
|---|--|--|---|------|------|------|------|
| Economic Development | | | | | | | |
| Increase availability for loans for businesses | Empowerment Bank Investment Shop Direct Loan Pool | Provide a minimum of 35 direct loans per year | Empowerment Zone, Small Business Administration | x | x | | |
| | Empowerment Bank Investment Shop Gap Financing Loans | Provide a minimum of 20 gap financing loans per year | Empowerment Zone, Small Business Administration | x | x | | |
| | Empowerment Bank Investment Shop | Create 50 new jobs per year | Empowerment Zone | x | x | | |
| | Microloan Program | 30 loans per year | Empowerment Zone | x | x | | |
| Provide easy to understand "how-to" information to business start-ups and existing small businesses | Credit Counseling | 70 counseling sessions per year | Empowerment Zone | x | x | | |
| | Small Business Development Center | 200 people served through individual counseling | Empowerment Zone | x | x | | |
| | Small Business Development Center | 10 training sessions, 600 attendees | Empowerment Zone | x | x | | |
| | Develop a "How To" Business Primer | Print 2,500 copies for distribution | Empowerment Zone | x | x | | |
| Develop sites to bring in new industrial/commercial development | Redevelop Brownfields | Assemble 150 acres | <i>City of Knoxville?</i> | x | x | x | |

| Housing Affordability and Choice | | | | | | | |
|--|---|---|--|-------------|-------------|-------------|-------------|
| Strategy | Action | Performance Benchmark | Primary funding source | 2000 | 2001 | 2002 | 2003 |
| Housing and homeownership programs | Minor Home Repair | Provide minor home repairs to 140 very low income elderly and disabled homeowners | CDBG | x | x | x | x |
| | FirstHome Training Program | Provide training for 150 households | CDBG | x | x | x | x |
| | First time homeownership programs | Provide assistance, including financing and training for 80 households per year | CDBG, HOME, HOPE3 | x | x | x | x |
| | Homemakers program | Acquire and sell 30 blighted housing units for rehab or infill | CDBG | x | x | x | x |
| | Rehabilitate rental units | Rehabilitate 50 rental units per year | CDBG, HOME, EZ? | x | x | x | x |
| | Rehabilitate owner-occupied housing units | Rehabilitate 50 homeowner units per year | CDBG, HOME, EZ? | x | x | x | x |
| | Conduct CHDO programs | Assist 8 households per year | CDBG, HOME | x | x | x | x |
| Workforce Competitiveness | | | | | | | |
| Develop or expand education and training options available for Zone residents and improve access of Zone residents to these training opportunities | Neighborhood Career and resource Center | Provide services for 1700 residents | EDI-Special Projects, Empowerment Zone | x | x | | |

| Strategy | Action | Performance Benchmark | Primary funding source | 2000 | 2001 | 2002 | 2003 |
|---|---|--|------------------------|------|------|------|------|
| Civic Attachment and Community Building | | | | | | | |
| Develop initiatives that help to create a sense of identity, sharing, participation, and fellowship among neighbors | Transforming Neighborhoods Together | Provide grassroots neighborhood training to 2 neighborhoods per year | CDBG | x | x | x | x |
| | Technical Assistance for neighborhood and nonprofit organizations for neighborhood improvement activities | Provide assistance to 10 organizations | CDBG | x | x | x | x |
| | Beck Cultural Center | Assist with renovations of 1 facility | CDBG | x | | | |
| | YWCA, Phyllis Wheatley Branch | Assist with renovations of 1 facility | CDBG | x | | | |
| Empowerment Zone Governance Structure | | | | | | | |
| Develop EZ governance structure | Establish Zone Advisory Councils (ZACs) | Develop, train and maintain six ZACs, with 15 voting members each | Empowerment Zone | x | x | | |